

AL. 4530
Rhondda Urban District Council.

REPORT

OF

The Medical Officer of Health

AND SCHOOL MEDICAL OFFICER

FOR

THE YEAR 1919.

TONYPANDY.

Evans & Short, General Printers, Bookbinders and Stationers.

Rhondda Urban District Council.

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Members of the Council.

COUNCILLOR	EVAN JOSHUA RODERICK, J.P.
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„	REES MORGAN REES.
„	GWILYM LLOYD.
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„	JOHN MINTON.
„	<u>DAVID THOMAS, J.P.</u>
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„	WILLIAM D. MORGAN (9 months).
„	ISAAC T. REES (9 months).
„	WILLIAM LEWIS.
„	JAMES JAMES.
„	WILLIAM EVANS THOMAS, M.D., J.P.
„	THOMAS THOMAS.
„	WILLIAM SAMUEL LANE.
„	THOMAS OWEN.
„	JOHN D. WILLIAMS, J.P. (3 months).
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„	EDWARD THOMAS WOOD.
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„	JOHN WILLIAMS (9 months).
„	DANIEL EVANS, J.P.
„	HENRY EDWARD MALTBY.

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Sir WALTER NICHOLAS.

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„	ALFRED GLADSTONE TRIBE.
„	WILLIAM LEWIS (3 months).
„	WILLIAM D. MORGAN (9 months).
„	WILLIAM EVANS THOMAS, M.D., J.P.
„	MARK HARCOMBE.
„	EDGAR MORGAN.
„	BENJAMIN DAVIES.
„	EDWARD THOMAS WOOD.
„	HORATIO ABRAHAM PHILLIPS
	(3 months).
„	JOHN WILLIAMS (9 months).
„	HENRY EDWARD MALTBY.

The Maternity and Child Welfare Committee.

The Members of the Health Committee, together with the following co-opted Members:—

LADY FLORENCE NICHOLAS.
MRS. PRISCILLA BROWN.
MRS. ROSAMOND C. DAVIES.
MRS. ELIZABETH ANDREWS,
MRS. EVELYN WILLIAMS (for portion of year)
MRS. FLORENCE MAUD BARTLETT (for portion of year).

The Housing Committee.

All the Members of the Maternity and Child Welfare Committee.

Officials of the Health and School Medical Service Departments.

*Medical Officer of Health, Medical Superintendent of the Council's
Hospitals and School Medical Officer—*

J. D. JENKINS, M.D., B.S. (Lond.), D.P.H., &c.

*Assistant and Deputy Medical Officer of Health and School
Medical Officer—*

J. P. H. DAVIES, M.A., M.B., B.C. (Cambs.),
D.P.H., &c.

Assistant Medical Officers of Health and School Medical Officers—

HELENA G. JONES, M.B., B.S. (Lond.), D.P.H.
D. R. GILDER, M.R.C.S. (Eng.), L.R.C.P. (Lond.),
D.P.H.
P. HUGHES, M.B., B.S. (Lond.).

Matron of the Fever Hospitals—

ROSE E. SMITH.

Assistant Matron—

JESSIE L. MCGREGOR.

Inspector of Nuisances—

(a) J. TOWY THOMAS.

Assistant Inspectors of Nuisances—

(a.b.)	GWILYM REED	...	Sanitary District	No. 6
(a.b.)	JAMES WILLIAMS	...	do.	No. 3
(a.b.)	LEWIS T. DAVIES	...	do.	No. 5
(a.b.)	DAVID JONES	...	do.	No. 1
(a.)	D. BOWEN DAVIES	...	do.	No. 2
(a.b.)	GWILYM GRIFFITHS	...	do.	No. 4
(a.b.)	EDGAR M. THOMAS.			
(a.)	OWEN M. LEWIS.			
(a.b.)	DAVID J. OWEN (for portion of year)			No. 2

Shops Inspectors—

(a.b.) RICHARD THWAITES.

(a.b.) THOMAS OSBORNE.

Health Visitors and School Nurses—

(f.g.)	MRS. LAURA JONES	...	No. 9	District.
(f.)	MISS ELIZABETH HUGHES	No. 3	„	
(a.f.)	MISS KEZIAH EDWARDS	No. 8	„	
(f.)	MISS SOPHIA THOMAS	No. 1	„	
(f.g.)	MISS GERTRUDE WATTS	No. 5	„	
(g.)	MISS SOPHY WILLIAMS	No. 7	„	

For Portion of Year:—

(d.e.f.g.)	MISS G. WILLIAMS	No. 6	„	
(f.)	MISS EDITH M. WATKINS	No. 2	„	
(f.g.)	MISS BEATRICE M. LEWIS	No. 10	„	
(g.)	MISS NELLIE D. JENKINS	No. 4	„	
(f.g.)	MISS EDITH GRIFFITHS	No. 4	„	

(g.)	MISS GLADYS DAVIES	No. 6 District.
(f.g.)	MISS ELIZABETH TERRY	
(c.d.)	MISS MADELEINE JOHN	
(e.f.)	MISS KATE OWEN	No. 9 ,,

Clerks—

T. J. REES.
 A. O. MORGAN.
 D. J. LEWIS.
 D. H. DAVIES.
 MISS ANNIE R. JAMES.
 MISS ANNIE M. EVANS.
 D. G. ROSSER.
 J. EMLYN JONES.

In charge of Disinfectors—

L. TRENBERTH.

N O T E S .

- (a.) Holds the Sanitary Inspectors' Certificate granted by the Royal Sanitary Institute.
- (b.) Holds the Meat Inspectors' Certificate granted by the Royal Sanitary Institute.
- (c.) Holds the Sanitary Inspectors' Certificate granted by the London Sanitary Inspectors' Examination Board.
- (d.) Holds the Health Visitors' Certificate granted by the Royal Sanitary Institute.
- (e.) Holds Certificate of Royal Sanitary Institute for Maternity and Child Welfare Workers.
- (f.) Holds the Midwives' Certificate granted by the Central Midwives' Board.
- (g.) Has Nursing experience,

Telephone Numbers.

Medical Officer of Health—Office	...	39	Pentre
„ „ Hospital	...	47	Pentre
Assistant and Deputy Medical Officer	...	43	Pentre
Inspector of Nuisances	... ..	17	Pentre
Assist. Inspector of Nuisances No. 1 Dist.		3	Treorchy
„ „ No. 2	„	39	Pentre
„ „ No. 3	„	8	Tonypandy
„ „ No. 4	„	13	Tonypandy
„ „ No. 5	„	3	Porth
„ „ No. 6	„	2	Ferndale

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RHONDDA URBAN DISTRICT.

Area	23,885 acres
Population (Census, 1911)	152,781
Civil Population (estimate at Midsummer, 1919):—						
For Death-rate	...	...	...	...	...	177,911
For Birth-rate	...	...	...	...	...	185,329
Rateable Value	...	...	...	...	...	£657,985
Birth-rate for 1919	...	...	...	...	per 1,000	23.0
Average birth-rate for 10 previous years					,,	32.0
Crude Death-rate (from all causes) for 1919	...	...	...	...	...	,, 11.9
Corrected Death-rate (from all causes) for 1919	...	...	...	...	...	,, 13.1
Average uncorrected Death-rate for 10 previous years	...	...	...	...	...	,, 14.4
Zymotic Death-rate for 1919	...	...	...	...	...	,, 0.7
Average Zymotic Death-rate for 10 previous years	...	...	...	...	...	,, 1.7
Death-rate from Pulmonary Tuberculosis for 1919	...	...	...	...	...	,, 0.66
Average Death-rate from Pulmonary Tuberculosis for 10 previous years	...	...	...	...	...	,, 0.79
Death-rate from other forms of Tuberculosis for 1919	...	...	...	...	...	,, 0.18
Infantile Mortality for 1919	...	...	...	...	per 1,000 births	111
Average Infantile Mortality for 10 previous years	...	...	...	...	,, ,,	126

Rhondda Urban District Council.

ANNUAL REPORT

OF

The Medical Officer of Health
FOR 1919.

*To the Chairman and Members of the Rhondda Urban
District Council.*

GENTLEMEN,

I beg to submit for your consideration my annual report upon the vital statistics and sanitary condition of the Rhondda Urban District during the year 1919.

It has not yet been possible to restore the report to its pre-war dimensions or detailed comprehensiveness but as the former conditions are gradually re-established or improved, no effort will be spared to make the report to correspond to the interest and importance attaching to the circumstances and activities with which it deals.

The general death-rate for the district for the year 1919 amounted to 13.1 per 1,000 of the living population, and presents an appreciable reduction whether compared with the rate of 15.9 belonging to the previous year or with that of 14.4 representing the average rate for the ten previous years.

The zymotic death-rate of 0.7 per 1,000 for the year also affords satisfaction as being the lowest for the district for at least 30 years and is less than one-half that of the previous year.

In the case of the infantile mortality there has been a slight retrogression as compared with recent years, the lowest hitherto recorded for the district being the rate of 103 per 1,000 births belonging to each of the two previous years whereas the rate of 111 pertaining to 1919 is slightly lower than the 112 which is the average for the 5 years immediately preceding that under review.

During the year greater activity in improving the housing conditions in the district has been possible, not only towards providing additional houses but also and chiefly in restoring to a state of repair and in maintaining existing houses, a great number of which have during the war ceased to be in all respects reasonably fit for human habitation. The housing conditions in the district are however such as to demand the unremitting and long-continued attention of the Council and the question of housing accommodation in relation to the needs of the population is now and is likely to continue for some years a most pressing and indeed vital problem which will test the earnestness and pertinacity of the Council to the utmost.

I am,

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'J.D. Jenkins', written in a cursive style.

Medical Officer of Health.

The Council Offices,
Rhondda.

POPULATION.

1911 (last Census year)	152,781
1919 (Registrar-General's estimate for death-rate)	177,911
1919 (Registrar-General's estimate for birth-rate)	185,329

The Registrar-General's estimates of the Rhondda populations for death-rate and birth-rate shew increases of approximately 30,000 and 25,000 respectively over the estimates for 1918.

It is however generally acknowledged that estimates of population in years considerably removed from a census year are markedly inaccurate, and statistics calculated from such estimates are, therefore, correspondingly erroneous. It is understood that the Ministry of Health has under consideration a scheme for obtaining more detailed information in the forthcoming census in 1921 and it is anticipated that the vital statistics available for reports subsequent to that census will be based on more accurate information.

The natural increase in the population, or the excess of births over deaths in 1919, amounted to 2,152, the estimate for the total population being as given at the commencement of this section.

BIRTHS.

	1919.	Average for Ten Years. 1909-1918.
Number of Births	4,263	5,095
Birth-rate in Rhondda	23.0	32.0
Birth-rate in England and Wales ...	18.5	22.5

There were 83 fewer births in 1919 than in the previous year, and the resulting birth-rate is the lowest yet recorded in the Rhondda, being 11.3 per 1,000 less than the average* for the period 1909-1918, and 15.4 per 1,000 less than the average for the preceding intercensal period. The birth-rate in the Rhondda, as in the country as a whole, has steadily decreased for a considerable number of years, the fall in the Rhondda rate having been almost continuous from year to year since 1902,—when the rate was 41.8 per 1,000,—the downward progress having been especially marked since 1914. It is obvious however that the war has been an important factor in the hastening of the reduction in recent years, the withdrawal and loss from the community of so many men in the procreative period of life having inevitably led to this result. There is evidence that since demobilisation has had time to exercise any influence there has been an upward tendency in the birth-rate or at least a marked retardation in the rate of its fall. The problem of the falling birth-rate is one which has been causing considerable anxiety in this, as in some other countries, and has been the subject of inquiry by a Royal Commission. The chief result up to the present of the findings of the Commission has apparently been to still further concentrate the energies of those interested upon the preservation and welfare of those that are born so that even if the number of births is reduced the chances of survival may be increased and the quality of the survivors may be improved.

Notwithstanding this great reduction, the birth-rate in the Rhondda compares favourably with those for England and Wales, the 96 Great Towns and the 148 Smaller Towns, the figures for the three last being 18.5, 19.0 and 18.3 respectively.

The births of males and of females were approximately equal in number, the totals being 2,141 males and 2,122

females, the difference in favour of the former being less than usual.

There was considerable inequality in the quarterly distribution of the births, the numbers being 1,026, 786, 1,049 and 1,402 for the four quarters in succession.

ILLEGITIMACY.

There were registered during the year 127 illegitimate births as belonging to the Rhondda, the numbers for the five immediately preceding years being 142, 113, 106, 146 and 139. The number recorded for the year under review is equivalent to 0.68 of the total population and to 30 per 1,000 births, the latter rate being, with two exceptions, the highest recorded for any year since 1894. The corresponding rates for England and Wales as a whole were 1.11 and 62.6 respectively for the year 1918, the data for 1919 not being yet available. For the purpose of arriving at a relatively true illegitimacy rate for a certain district or sanitary area it would be necessary to ascertain the number, or at least the proportion to the total population, of the unmarried women of conceptive age in that district. This information is not available and the year under consideration is so far removed from the last census year and the war has caused such changes in the distribution of population in relation to sex and age that an estimate based on the census taken in 1911 would afford but unsafe guidance.

DEATHS.

	Average for Ten Years.	
	1919.	1909-1918.
Number of Deaths	2,111	2,219
Rate per 1,000 in Rhondda	11.9	14.4
Rate per 1,000 in 96 Great Towns ...	13.8	—
Rate per 1,000 in England and Wales	13.8	14.6

The total number of deaths registered in the district during 1919 amounted to 2,024, of which 25, including the deaths of 5 soldiers, were of persons not belonging to the Rhondda. On the other hand there must be added to the number of 1,999 thus arrived at the deaths of 112 Rhondda residents which occurred outside the district with the result that a net total of 2,111 deaths of persons belonging to the district is attained. The 112 deaths which occurred elsewhere were accounted for by 26 at Cardiff Infirmary, 35 at Bridgend Asylum, 16 at Pontypridd Workhouse and 35 at various other places.

The total of 2,111 deaths allocated to the district is less by 129 than the number for the previous year, and gives a crude death-rate of 11.9 per 1,000 of the living population.

This death-rate is the lowest yet recorded in the Rhondda and is in accordance with the steady decline, which, with few exceptions, such as that caused by the epidemic of influenza in 1918, has taken place for many years.

The corresponding figure for England and Wales, and the 96 Great Towns, is 13.8, Rhondda occupying the twenty-seventh place among the latter.

Chief amongst the causes of death were the following:—

Bronchitis	262
Premature and Marasmic Group	195
Influenza	195
Pneumonia (all forms)	180
Tuberculosis	148
Organic Heart Disease	144
Violent Deaths... ..	98
Cancer	87

The number and the percentage proportions of the deaths, divided into their respective age-groups, belonging to the Rhondda during the year are as follow:—

474	or 22 per cent.,	under 1 year of age.
105	or 5 per cent.,	1 year and under 2 years.
106	or 5 per cent.,	2 years and under 5 years.
95	or 5 per cent.,	5 years and under 15 years.
128	or 6 per cent.,	15 years and under 25 years.
340	or 16 per cent.,	25 years and under 45 years.
436	or 21 per cent.,	45 years and under 65 years.
427	or 20 per cent.,	65 years and over.

UNCERTIFIED DEATHS.

Of the 2,024 deaths which were registered within the Rhondda Urban District during the year, 1,898 were certified by registered medical practitioners, the District Coroner held inquests on 116, and the remaining 10 were uncertified by either coroner or medical attendant.

The respective proportions of the certified deaths, inquest cases, and uncertified deaths were 93.8, 5.7, and .5.

In the case of the ten uncertified deaths, the causes of death assigned were as follow:—

Premature Birth...	4
Congenital Debility...	2
Cerebral Hæmorrhage...	1
Convulsions ...	1
Heart Disease...	1
Marasmus ...	1

STILL-BORN CHILDREN.

I am indebted to Mr. William Powell, the Clerk to the Burial Board, for a record of the number of still-born children brought to the three cemeteries for burial during the years 1900 to 1919.

Year	No. of Still-born Children recorded.		No of Births Registered.		Rate per 1,000 Births.	Average for 10 year periods.
1900	...	312	...	4,469	...	69.6
1901	...	348	...	4,586	...	75.9
1902	...	333	...	4,937	...	67.5
1903	...	333	...	4,897	...	68.0
1904	...	301	...	4,860	...	61.9
1905	...	367	...	4,664	...	78.7
1906	...	323	...	4,751	...	67.9
1907	...	346	...	4,831	...	71.6
1908	...	354	...	5,454	...	64.9
1909	...	337	...	5,577	...	60.4
1910	...	321	...	5,628	...	57.0
1911	...	292	...	5,491	...	53.2
1912	...	268	...	5,236	...	51.2
1913	...	330	...	5,505	...	59.9
1914	...	355	...	5,558	...	62.1
1915	...	257	...	4,983	...	51.6
1916	...	230	...	4,481	...	51.3
1917	...	236	...	4,145	...	56.9
1918	...	203	...	4,346	...	46.7
1919		205		4,263		48.1

68.6

53.0

For purposes of comparison I also append a table giving the corresponding figures for premature births:—

Year.		Deaths from Premature Birth.		No. of Births Registered.		Rate per 1,000 Births.	Average for 10 year periods.
1900	...	66	...	4,469	...	14.7	14.7
1901	...	74	...	4,586	...	16.1	
1902	...	53	...	4,937	...	10.7	
1903	...	84	...	4,897	...	17.1	
1904	...	69	...	4,860	...	14.1	
1905	...	62	...	4,664	...	13.3	
1906	...	69	...	4,751	...	14.5	
1907	...	68	...	4,831	...	14.1	
1908	...	88	...	5,454	...	16.1	
1909	...	93	...	5,577	...	16.7	

Year.		Deaths from Premature Birth.		No. of Births Registered.		Rate per 1,000 Births.	Average for 10 year periods
1910	...	85	...	5,628	...	15.1	16.8
1911	...	85	...	5,491	...	15.5	
1912	...	87	...	5,236	...	16.6	
1913	...	84	...	5,505	...	15.3	
1914	...	99	...	5,558	...	17.8	
1915	...	65	...	4,983	...	13.0	
1916	...	75	...	4,481	...	16.7	
1917	...	72	...	4,145	...	17.4	
1918	...	77	...	4,346	...	17.7	
1919		98		4,263		23.0	

INFANTILE MORTALITY. Average for Ten Years.

	1919.	1909-1918.
Rhondda per 1,000 Births ...	111	128
96 Great Towns ...	93	...
England and Wales ...	89	105

Infantile mortality is calculated as the ratio of the number of deaths of infants under one year old to every thousand births.

In 1919 there were in the Rhondda 4,263 births and 474 deaths of children under one, the resulting infantile death-rate being 111, or 8 per 1,000 higher than that for the previous year. This increase was mainly due to the relatively large number of deaths caused by prematurity, whooping-cough, and non-tuberculous lung diseases (bronchitis and pneumonia). The number of babies who died under one week old amounted to 140, or 30 per cent. of the total, and 190, or 40 per cent., died within 4 weeks of birth.

In the course of the investigations made by the health visitors into the circumstances attending 4,496 babies during the year it was ascertained that 3,454, or 77 per cent., were entirely breast-fed, and that 733, or 16 per cent., were entirely bottle-fed. There were 205 deaths among the breast-fed, resulting in an infantile death-rate of 59 per 1,000 as compared with 117 deaths among the bottle-fed with a rate of 159 per thousand.

Some Statistics relating to Diets and Modes of Feeding.

	Total number in respect of whom records are available (4496).	Percent-ages of the total.	No of deaths in each group	Percent-ages of deaths to number in each group.	Percent-ages of deaths in each group to fatalities investigated (457).
Breast-fed	3,454	77	205	5.9	45.0
Partly-breast-fed	210	5	37	17.6	8.0
Entirely Bottle-fed	733	16	117	15.9	26.0
Spoon-fed	29	1	28	96.5	6.0
Unfed	70	2	70	100.0	15.0
Bottle { Boat-shaped	799	18	140	17.5	31.0
Used { Tube	139	3	13	9.3	3.0
{ Boat-shaped and Tube	5	0.1	1	20.0	0.2
Varieties { Cows' Milk	113	3	42	37.2	9.0
of { Condensed Milk	393	9	67	17.0	15.0
Milk { Other Foods (Glaxo,					
Used { Cow and Gate, etc.)	466	10	73	15.7	16.0

One records with regret and some misgiving the diminution in the relative number of breast-fed babies during the year as compared with the previous year, the difference being 4 per cent. The movement should be in the opposite direction having regard to the many advantages of natural over artificial feeding. Owing to the possible influence of other factors, one hesitates to attribute this unfavourable feature to diminished zeal in this direction on the part of midwives, health visitors and others engaged in this work, but it is well to draw attention to this retrograde tendency shown in our statistics relating to the year under review.

There were 30 deaths among the 127 illegitimate children with a resulting mortality of 236 per 1,000 births, as compared with a rate of 107 among the legitimate babies, the great difference between the two rates being striking testimony as to the very unfavourable circumstances usually attending the births and early life of illegitimate children. The nature of these circumstances is obvious in the large majority of instances, but it is believed that if the mothers could be given employment and a measure of independence which would serve to obviate the separation of mother from child, some of these lives might be saved.

During the year 1919, the maternity and child welfare centre at Trafalgar Street, Ystrad, was in use as such on 151 half-days throughout the year. The total number of visits paid to the Centre reached 4,133, the resulting average number of attendances being 27 for each half-day. The number of new cases seen at the Centre amounted to 1,123, of whom 870 were under a year old and 253 between 1 and 5 years of age. The revisits to the Centre numbered 2,856, of which 2,322 were of babies and 534 of children from 1 to 5 years. Included in the revisits were those of 89 children first

seen in the previous year. The average number of attendances of children under a year old was 3.3, and of children over that age 2.0 per child. The highest number of visits paid by an individual child was thirty.

There were 42 deaths among the children under one who attended the clinic, the resulting death-rate per 1,000, being 44.7, as compared with that of 111 for the Rhondda as a whole. Even when due allowance is made for certain fallacies which have been commented upon in previous reports, the difference between these two rates is a strong indication of the advantages derivable from visits to the Centre for the purpose of receiving the advice of the medical practitioner (Dr. Helena G. Jones), who devotes much time and thought to this special work. The benefits would be still greater if the visits were more regularly paid and maintained over a longer period.

During the year dried milk has been supplied at cost price in considerable quantities to nursing mothers requiring it for their babies and, at the time of writing, the sanction of the Council has been obtained to supply milk at less than cost price in necessitous cases. The facilities thus available for the distribution of milk in this way afford material advantages in the many instances where it is difficult to obtain fresh cows' milk, the Rhondda being exceptionally dependent for its milk supply upon importations from more or less distant districts, the length of time unavoidably taken by the milk in transit rendering it impossible for it to be purchaseable by the consumer until it is many hours old.

In addition to the nursing mothers and their babies who visited the Centre, 60 expectant mothers also attended for advice, the total number of 154 visits and revisits being paid by them for this purpose.

The periodical visits paid by the health visitors to the homes were continued and form an integral and important part of the maternity and child welfare work in the district in furtherance of which 25,142 such visits were paid by twelve health visitors employed by the Council.

At the time of writing, the Ynysir Welfare Centre is available, so that the Rhondda Fach Valley is at least as well served in this respect as the larger valley. No material progress was made in the course of the year towards acquiring a suitable site for the Model Maternity and Child Welfare Centre, the cost of whose erection and equipment will be generously undertaken by the Carnegie United Kingdom Trustees. Some delay was occasioned by the efforts made by the Council to secure a site other than that at Treallaw offered by the Marquis of Bute for this purpose, the more favoured site being also owned by him. At the time of writing information has been received that the first offer will be adhered to, so that the Council will now feel at liberty to proceed with the preparation of their scheme for submission to the Trustees and the Ministry of Health for their approval.

The accompanying table provides summarised information bearing upon infantile mortality in the district throughout the year:—

Table giving in detail the information obtained by the Health Visitors concerning deaths of 457 children under one and of 186 children born dead.

		Deaths of children under one.		Still-Births.	
		Total Number.	Per Cent of Total Cases.	Total Number.	Per Cent of Total Cases.
Sex	Male ..	245	54	86	46
	Female ..	212	46	100	54
Ages at Death.	0 to 12 hours	38	8		
	12 to 24 "	20	4		
	1 to 7 days	74	16		
	1 to 4 weeks	46	10		
	1 to 2 months	52	12		
	2 to 3 "	34	8		
	3 to 4 "	20	4		
	4 to 5 "	27	6		
	5 to 6 "	26	6		
	6 to 7 "	23	5		
	7 to 8 "	24	5		
	8 to 9 "	20	4		
	9 to 10 "	18	4		
	10 to 11 "	13	3		
	11 to 12 "	22	5		
Maturity	Mature ..	316	69	96	52
	Premature ..	141	31	90	48
	Insured ...	117	26		
	Not well from birth ...	146	32		
Previously visited by Health Visitor		293	64		
Separated from mother ..		...	...
Breast-fed ...		205	45		
Partly breast-fed ...		37	8		
Bottle-fed ...		117	26		
Spoon fed ..		28	6		
Unfed ..		70	15		
Bottle used.	Boat-shaped ..	140	31*		
	Tube ..	13	3		
	Boat-shaped and tube ...	1	1		
Milk	Cows' ..	42	9		
	Condensed ..	67	15		
	Patent Foods ...	73	16		
Abnormal number of flies in house		...	...
Insanitary condition of house		...	...
Overcrowding ...		18	4		
Previous deaths—					
1 child under one year of age		51	11	19	10
2 children " "		19	4	5	3
3 children " "		9	2	4	2
4 or more children " "		5	1	2	1
Total number with previous deaths of Infants under one year		84	18	30	16
Number with 1 previous still-birth		26	6	19	10
" " 2 " still-births		7	2	4	2
" " 3 " "		...	...	7	4
" " 4 or more " "		4	1	8	4
Total number with previous still-births		37	8	38	20
Abnormal condition of mother		123	27	85	46
Difficult birth		141	31	90	48
Illegitimate ...		24	5	7	4

The following table shows the extent to which the Notification of Births Act, 1907, has been observed since its adoption in 1909:—

		Births registered with District Registrars.	Births notified to Medical Officer of Health.	Percentage proportion of latter to former.
Portion of District served by Health Visitors.	1909($\frac{1}{2}$)	1,550	1,546	100
	1910	3,079	3,023	98
	1911	3,059	3,144	103
Portion of District not served by Health Visitors.	1909($\frac{1}{2}$)	1,237	1,050	85
	1910	2,549	1,236	48
	1911	2,404	1,670	69
Whole of Rhondda	1909($\frac{1}{2}$)	2,787	2,596	93
	1910	5,628	4,259	76
	1911	5,463	4,814	88
	1912	5,202	4,898	94
	1913	5,479	5,522	101
	1914	5,541	5,444	98
	1915	4,960	4,995	101
	1916	4,481	4,695	105
	1917	4,145	4,361	105
	1918	4,346	4,349	100
	1919	4,263	4,573	107

NOTES.—(1) In 1912 Health Visitors were appointed to serve the whole of the Urban District.

(2) The excess of the number of births notified to the Medical Officer of Health over the number registered in some years is due to the inclusion of still-births in the former, and to the discrepancies arising in consequence of the different intervals after birth allowed for notification and registration respectively.



MIDWIVES ACT, 1902. AND SUPERVISION OF MIDWIVES.

Until October 1st, 1918, the administration within the Rhondda Urban District of the Midwives Act, 1902, was carried out by the Glamorgan County Council who, as and from that date and in accordance with the provisions of Section 9 of that Act, delegated to the District Council the supervisory powers vested in them by Section 8 of the Act. One of the Rhondda Council's Assistant Medical Officers (Dr. Helena G. Jones) was appointed Inspector of Midwives and much of the material needed for the preparation of this section has been obtained as a result of her inspections and investigations. The closer association with the midwives of the district thus rendered possible helps very materially in securing a greater efficiency and thoroughness in the promotion of certain phases of maternity and child welfare work and it is believed that the midwives themselves will be among the first to admit and appreciate the advantages of a closer relationship than was possible before the delegation referred to.

There are 120 midwives practising in the Rhondda, 83 of whom possess the Central Midwives Board Certificate or its equivalent, the remaining 37 being certified in virtue of having been in *bonâ-fide* practice prior to the first of August, 1901. (See table.) The number belonging to the latter category is naturally becoming progressively smaller from year to year owing to retirement or death. During the year 1919 there were 9 deaths among the midwives throughout the district. As there were only 4,263 births in the Rhondda during 1919, the district is well served in this direction, even if all the confinements depended upon local midwives for the service required.

Table giving the Ward distribution of Midwives, 1919.

Wards.	Total.	Trained.	Untrained.
1	11	8	3
2	14	12	2
3	5	3	2
4	7	5	2
5	9	6	3
6	10	5	5
7	7	3	4
8	9	7	2
9	30	22	8
10	18	12	6
Tota l	120	83	37

It is exceptional for a medical man to be in attendance, the number of births during the year which required medical attention being only 14.2 per cent. of the whole, the services of a doctor being usually sought only when difficulties or abnormalities are encountered. The most common of these in the course of the year were prolonged labour (in 166 cases), rupture of the perineum (in 64 cases) and abortion or threatened abortion (in 58 instances).

The accompanying table provides a summary of the information given by the midwives of the district under the Rules of the Central Midwives Board concerning the causes calling for medical attendance, distinction being made between day and night calls, the grouping in the other columns being in accordance with their distribution in district wards of the cases requiring special attention in

Analysis of Notifications by Midwives of Summonses for Medical Help, 1919.

Reason given for Sending.	Day.	Night.	WARD										Totals.
			1	2	3	4	5	6	7	8	9	10	
Abortion or Threatened													
Abortion	34	24	16	11	5	4	..	..	6	6	8	2	58
Excessive Sickness ... ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puffiness of Hands and Face	4	2	3	..	..	1	..	..	..	..	2	..	6
Dangerous Varicose Veins ..	1	1	2	..	..	..	..	..	..	..	..	..	2
Purulent Discharge	1	5	4	1	..	..	..	..	..	..	..	1	6
Prolonged Labour	94	2	23	41	7	6	5	10	7	18	28	21	166
Fits or Convulsions	4	..	..	..	..	..	..	1	..	..	1	2	4
Malpresentation	11	18	5	4	..	1	3	2	1	2	2	9	29
Undiagnosed Presentation ..	3	..	1	..	1	..	..	..	..	..	..	1	3
Sores of the Genitals .. ..	..	1	..	1	..	..	..	..	..	..	..	..	1
Uterine Inertia	8	7	3	4	1	..	..	2	..	..	3	2	15
Placenta Previa	2	1	1	..	..	..	..	2	..	..	..	..	3
Secondary Uterine Inertia ..	..	1	..	..	..	..	..	..	..	..	..	1	1
Rupture of the Perineum ..	44	20	10	7	9	4	2	3	4	2	11	12	64
Hæmorrhage	19	23	1	6	2	3	2	2	6	5	3	12	42
Retained Placenta or Mem- branes	21	28	6	5	3	2	1	2	7	5	9	9	49
Impacted Head .. ..	..	2	..	..	..	..	..	1	1	..	..	..	2
Contracted Pelvis	4	3	..	..	..	..	..	1	3	..	2	..	7
Prematurity	9	2	1	2	2	..	1	2	1	1	1	..	11
Rise of Temperature	14	3	1	4	1	..	1	3	3	2	2	..	17
Obliquity of Uterus	1	..	..	..	..	..	..	..	..	..	1	..	1
Occipito-Posterior Presentation	12	4	..	1	..	1	..	2	8	2	1	1	16
Exhaustion	5	3	2	..	..	..	..	..	1	2	2	1	8
Dyspnœa .. ..	..	1	..	..	..	..	..	..	..	..	..	1	1
Inflammation of Vein	1	..	..	..	..	..	..	1	..	..	..	..	1
Prolapse of Uterus .. ..	..	1	..	..	..	..	..	..	..	..	..	1	1
Spina Bifida	1	1	..	..	1	..	..	..	..	1	..	..	2
Rigid Os	1	3	..	1	..	..	..	..	..	..	1	2	4
Still Birth	5	2	..	2	1	..	1	..	..	3	..	..	7
Prolapse of Cord .. ..	..	1	..	..	..	..	..	..	..	..	1	..	1
Pain or Swelling in Legs ..	2	..	..	..	..	..	..	1	..	1	..	..	2
Offensive Lochia	1	..	..	..	1	..	..	..	..	..	..	..	1
Fracture of Clavicle	1	..	..	..	..	1	..	..	..	..	..	..	1
Condylomata	1	..	1	..	..	..	..	..	..	..	..	..	1
Ophthalmia or Conjunctivitis	46	1	9	4	5	1	2	2	6	3	7	8	47
Feebleness of Infant	14	10	5	2	..	3	1	2	3	1	5	2	24
Skin Eruptions .. ..	..	2	1	1	..	..	..	..	..	..	..	..	2
Malformation of Child ..	3	2	1	..	..	2	..	..	..	..	1	1	5
Suffocation of Child .. ..	..	1	..	..	..	..	..	1	..	..	..	..	1
Fits or Convulsions .. ..	..	2	..	1	..	1	..	..	..	..	..	..	2
Tongue Tie	1	..	..	..	1	..	..	..	..	..	..	..	1
Totals ..	368	247	96	98	40	30	19	39	58	55	91	89	615

this form. One of the recently-added Rules of the Central Midwives Board is one requiring every midwife to notify to the supervising authority any instances in her practice in which the mother resorts to artificial feeding of her infant during the period for which the midwife continues her attendance. The total number of such cases notified throughout the district reached 42, every ward in the district contributing one or more of them. A consideration of the causes leading to the adoption of this course strongly suggests that in all but about half-a-dozen proper advice to and, when necessary, treatment of the mother before her confinement would have served to prevent the necessity to resort to artificial feeding of the infant. It is noteworthy that in only 4 instances was a return of the mother to her usual employment given as the cause. Although the total number notified is gratifyingly small, as much as possible should be done to reduce the number in the manner already indicated because of the prejudicial effect upon the expectation of life of the child of an early deprivation of its natural sustenance. There seems to exist a certain uncommendable proneness on the part of certain doctors and midwives to withhold their definite discouragement in instances where the mother's own inclination or desire tends in this direction even if not to advise a resort to this step as a panacea for any ills that may arise during the puerperal period.

Thirty visits to midwives on the part of the Inspector of Midwives were necessary for special reasons, the occurrence of ophthalmia neonatorum in their practice being the most common cause for such visits.

OPHTHALMIA NEONATORUM.

The condition known as ophthalmia neonatorum is defined as a purulent ("mattery") discharge from one or both eyes of a new-born child. Under the General Order

of April 1st, 1914, it must occur within 21 days of birth to be compulsorily notifiable.

It is caused by the entrance into one or both eyes of some infective material which is not infrequently gonorrhœal or venereal in character and it is communicable to other persons. It is never caused by a "draught" or "cold" as so commonly alleged. It is also preventible if proper precautions are taken by the midwife or other person in attendance at birth and unless actively and skilfully treated it is apt to cause serious impairment or even loss of sight.

During 1919 there were notified in the Rhondda a total of 83 cases of the disease, equivalent to 19 per 1,000 of the babies born. Of these 18 were notified by medical practitioners only, 47 by midwives only and 18 by both. The two eyes were attacked in 67 cases, the right only in 8 and the left only in an equal number. When both eyes become infected, one is usually attacked first, the second becoming affected by direct contamination from that primarily involved.

In one instance permanent damage resulted in both eyes and in 75 cases the disease cleared up completely. Three children died before the disease ran its course, three were removed to hospital for treatment, and the remaining one was lost sight of.

Each case was visited at least once by a member of the medical staff and as a matter of routine practice by the health visitor of the district by whom active assistance was rendered in 65 instances, to each of two of which 51 visits were thus paid. In many instances however the disease was so mild as to call for only one or two visits, the average number of visits paid being 13 per case.

The duration of the disease varied from 113 days to 3 days, the average being 30 days.

In only three instances was there positive information that the mother was suffering from gonorrhœa before the birth, although said to be ailing or suffering in some form or other in 19 instances.

In six cases it was stated that the disease commenced on the day of birth but the onset on the average did not take place until 6 days after birth.

Midwives only attended 65 of the births but 18 were attended by both doctors and midwives. The highest number recorded in any individual midwife's practice was 7 all of which completely recovered; another midwife had 5 cases, two had 4 cases each, three had 3 cases each, and in the remainder no midwife had more than one case of ophthalmia neonatorum in her practice throughout the year.

ZYMOTIC DISEASES.

Average for
Ten Years.

1919. 1909-1918.

Total number of Deaths in Rhondda			
from Zymotic Diseases	...	117	260
Zymotic Death-rate for Rhondda	...	.7	1.7

For statistical purposes the following are regarded as zymotic diseases:—Small-pox, measles, scarlet-fever, diphtheria, whooping-cough, typhoid and other continued fevers, and diarrhœa, and the zymotic death-rate, which is the ratio of the number of deaths from these diseases to the population, is an important index of the sanitary condition of the district.

The total number of deaths from these diseases is the smallest since 1888, and the resulting death-rate is the lowest ever recorded for the area, Wards 5 and 7 presenting the most and Wards 1 and 10 the least satisfactory records.

SMALL-POX.

No instance of this disease was ascertained to have occurred in the district during the year.

MEASLES.

Average for
Ten Years.

	1919.	1909-1918.
Number of cases notified	611	
Number of Deaths	25	72
Death-rate per 1,000, Rhondda... ..	.14	.47
Death-rate per 1,000, 96 Great Towns	.13	.38
Death-rate per 1,000, England and Wales... ..	.10	.30

The number of notifications of measles received in 1919 amounted to 611, or less than one-fifth of the number for 1918, while the total of 25 deaths which resulted from the disease was equalled in 1910, but, with that exception, is the lowest since 1906. The death-rate of .14 per 1,000 inhabitants is only slightly in excess of the rates for the 96 Great Towns.

No locality was immune from the disease, but Wards 1 to 4 and 6 to 8 were comparatively free, only 9 per cent. of the total cases having occurred within those seven wards. Ward 10 was seriously affected, and Wards 9 and 5 to a lesser degree, the percentage of cases notified in these three localities being 58, 19.5, and 13.5 respectively.

The incidence, as far as Ward 9 is concerned, was greatest during July and August, when 107 out of a total of 119 cases were notified, whereas it was not until October, November and December, that the prevalence of the disease became marked in Wards 10 and 5, which contributed 354 and 84 cases respectively during the last three months of the year.

Ninety-seven per cent. of the cases occurred in children under 12 years of age, 44 per cent. of these being between the ages of 5 and 12, and 56 per cent. under 5 years. Of the fatal cases 76 per cent. were under the age of 5, the remaining 24 per cent. being over 5 and under 15 years of age.

Owing to the prevalence of measles the whole of the third class of Dyffryn Infants' School was excluded from October 21st to November 10th, and the first class of Tre-alaw Infants' School from December 4th to December 12th.

The accompanying table gives the number of visits and revisits made by the Health Visitors as part of the scheme for controlling Measles and German Measles.

Visits paid by the Health Visitors during 1919 in connection with the Control of Measles.

MEASLES.			GERMAN MEASLES.	
Ward.	Primary Visits.	Revisits.	Primary Visits.	Revisits.
1	3	16	1	17
2	10	27	—	—
3	11	21	3	11
4	21	65	4	9
5	59	70	8	13
6	14	24	17	8
7	8	20	—	—
8	13	25	—	—
9	143	403	2	2
10	338	401	2	5
Totals	620	1072	37	65

N.B.—In the table the number of primary visits paid slightly exceeds the number notified, the apparent discrepancy being due to the occurrence of secondary (and not compulsorily notifiable) cases in the same household, the first inquiry in these instances being regarded as primary.

Thus the houses affected are visited by the Health Visitors, advice as to the prevention of dangerous complications and of the spread of the disease is given to the parents, and contacts are excluded from school for the requisite period.

Measles and German Measles ceased to be compulsorily notifiable after the 31st December, 1919, the Public Health (Measles and German Measles) Regulations, 1915, having been rescinded by an Order dated November 27th, 1919. While it is recognised that, owing to the nature of the disease, the compulsory notification of measles cannot, for preventive purposes, lead to such effective control as in the case of many other infectious diseases, it is regretted that prompt intimation of an outbreak is no longer available owing to the withdrawal of compulsory notification of the disease, for the requirement served as the essential preliminary to the application of the preventive measures provided for in our adopted scheme. Experience of this scheme, due allowance being made for the inadequacy of the staff at times of exceptional prevalence, has been on the whole encouraging, and it is hoped that evidence will later be available to justify the Council in making application to the Ministry of Health for the restoration of compulsory notification of measles to the whole or a part of the district.

GERMAN MEASLES.

Number of Cases	74
Number of Deaths	1

Seventy-four cases of German Measles were notified during the year, 12 more than in 1918, and one death was certified as being due to this disease. The majority of the cases occurred in November and December, and Wards 4, 5, and 6 were those chiefly affected, it being noteworthy that the area of greatest prevalence is not identical with that of measles.

Regarding the age incidences of the disease, children under 12 are most liable to infection, all but 7 of the notified cases being under that age.

SCARLET FEVER.

	Average for Ten Years.	
	1919.	1909-1918.
Number of Cases	440	685
Number of Deaths	4	14
Death-rate per 1,000, Rhondda ... ..	.02	.09
Death-rate per 1,000, 96 Great Towns ...	.04	.07
Death-rate per 1,000, England and Wales ... ..	.03	.05

There were notified 440 cases during 1919, the disease being more prevalent than in the three immediately preceding years, when 127, 184, and 327 cases occurred in successive years.

The localities chiefly affected were Wards 1, 9, and 2, with 105, 104, and 62 cases respectively, while Wards 4, 10 and 8, with 13, 14 and 19 cases, were comparatively free.

In spite of the comparatively large number of cases which occurred during the year, the death-rate per thousand in the Rhondda (.02) compares favourably with the rates for the 96 Great Towns, and England and Wales respectively, and it is gratifying to be able to record that

both the number of deaths,—4,—and the mortality per cent. of cases,—0.9,—are the lowest for the district since the disease was made notifiable in 1894.

From the figures given above and as the result of a special investigation made at Treherbert it may be assumed that the type of disease was mild during the year under review; but its very mildness constitutes a danger in-as-much as cases occur with symptoms so slight that the nature of the disease is not suspected, no medical man is consulted, and the patient unwittingly spreads infection far and wide while attending school, frequenting public places or following his usual occupation.

The incidence of the disease was greatest in the last quarter of the year,—in which period more than 50 per cent. of the total cases occurred,—and was least during the annual school holiday in August, when only 6 cases were notified.

As many as 62.7 per cent. of the notified cases occurred among children between the ages of 5 and 12 years with a case mortality of .72 per cent.; children under 5 years contributed 22.5 per cent. of cases with a fatality of 1 per cent.; while the remaining 14.7 per cent. of the patients were over 12 years with a resulting mortality of 1.5 per hundred cases notified.

DIPHTHERIA.

	Average for Ten Years.	
	1919.	1909-1918.
Number of Cases	203	171
Number of Deaths... ..	19	26
Death-rate per 1,000, Rhondda	11	.17
Death-rate per 1,000, 96 Great Towns ...	.14	.14
Death-rate per 1,000, England and Wales... ..	.13	.13

During the year 203 cases of diphtheria were notified as compared with 120 cases in the previous year and with 108 in 1917.

The year's total is in excess of the average for the last ten years, but the death-rate per 1,000 of the population in the district compares favourably with the rates for the 96 Great Towns and England and Wales respectively, as well as with the corresponding average for the previous decade. The 19 deaths resulting from the disease give a case mortality of 9.4 per cent., the figures for 1917 and 1918 being respectively 21.3 and 9.2.

Although more than half the total cases occurred during the last four months, no month throughout the year contributed less than 7 cases to the total.

Wards 9, 1 and 8, with 33, 31 and 27 cases respectively, were the most, and Ward 4, with 11 cases, the least affected localities.

More than 82 per cent. of the notified cases were under 12 years of age, 50, or 24.6 per cent., under 5 years, and 118, or 58.1 per cent., between the ages of 5 and 12.

The mortality from the disease was greatest amongst patients under 4 years, 73.7 per cent. of the deaths having occurred among patients below that age.

TYPHOID FEVER.

		Average for Ten Years.
	1919.	1909-1918.
Number of Cases	29	56
Number of Deaths	5	9
Death-rate per 1,000, Rhondda ... ..	.03	.06
Death-rate per 1,000, 96 Great Towns ...	.01	.04
Death-rate per 1,000, England and Wales ... ..	.01	.04

There were notified during the year 29 cases of typhoid fever, which total,—with the exception of that of 1918 when 21 cases occurred,—is the lowest number since the disease was made notifiable in 1894. The death-rate of .03 per 1,000 is only one-half the average for the ten previous years, but is greater than the rates for the 96 Great Towns and England and Wales by .02. The fatality rate was 17.2 per cent. as compared with 23.8 in the previous year.

The district Wards chiefly affected were 4 and 6, with 14 and 6 cases respectively. Wards 1 and 10 were entirely free from the disease during the year, whereas each of the six remaining Wards contributed one or two cases. The majority of the cases occurred during the last four months of the year.

Out of the total of 29 cases, 14 were notified from the Gelli area in Ward 4, four of them occurring in one house during September, and three in another house in November. In the former case it appeared probable that the two individuals first attacked contracted the disease while spending a holiday in Swansea.

Included in the cases classified under typhoid fever are three of continued fever and two of paratyphoid.

Article XV. of the Public Health (Pneumonia, Malaria, Dysentery, etc.) Regulations, 1919, which came into force on March 1st, 1919, contains provisions of considerable importance in dealing with actual cases and with carriers of the disease, as powers are thereby conferred for controlling persons in these two categories whose occupation is connected with the preparation or handling of food or drink for human consumption.

CEREBRO-SPINAL FEVER.

Number of Cases	1
Number of Deaths...	1
Death-rate per 1,000, Rhondda	.006

One case of cerebro-spinal fever was notified during the year, the locality involved being Ton. The diagnosis was confirmed by bacteriological examination of cerebro-spinal fluid obtained from the patient. There was no extension of the infection amongst persons associated with the patient, whose illness ultimately proved fatal.

The deceased had been closely associated just before her illness with a man in the Navy who had recently been discharged from a naval hospital after recovery from a disease believed to have been influenza.

The Public Health (Cerebro-Spinal Fever) Regulations, 1918, were revoked in the course of the year in favour of somewhat similar Regulations which came into operation on June 16th, 1919.

ACUTE POLIOMYELITIS.

No case of this disease was notified as having occurred within the district during the year.

ENCEPHALITIS LETHARGICA.

No notification of this disease was received during the year.

At the time of writing, intimation has been received from the Ministry of Health that the operation of the Public Health (Acute Encephalitis Lethargica and Acute Polio-Encephalitis) Regulations, 1918, is to be extended until further notice.

WHOOPIING COUGH.

	Average for Ten Years.	
	1919.	1909-1918.
Number of Deaths	38	35
Death-rate per 1,000, Rhondda . . . . .	.21	.23
Death-rate per 1,000, 96 Great Towns . . . . .	.07	.24
Death-rate per 1,000, England and Wales . . . . .	.07	.20

There were 38 deaths from whooping cough certified during the year, or one in excess of the figure for 1918. The death-rate of .21 per 1,000 thus caused is less by .04 than that for the preceding year, but is three times the rates for England and Wales and the 96 Great Towns.

District Wards 10, 9 and 1, with 16, 7 and 7 deaths respectively, contributed the greatest numbers, whereas no deaths occurred in Wards 5, 6, or 7, and the figures pertaining to the four remaining Wards ranged from one to three.

All the deaths occurred in children under 5 years of age, 19 being under 1 year, 10 between the ages of 1 and 2 years and the remaining 9 between 2 and 5 years.

Notwithstanding the general tendency to look upon whooping cough, in common with measles, as a trivial disease, it is noteworthy that the former caused 38 deaths and the latter 25 deaths in the Rhondda during the year whereas scarlet fever, diphtheria and typhoid fever combined were responsible for only 28 deaths during the same period.

DIARRHŒA.

	Average for Ten Years.	
	1919.	1909-1918.
Number of Deaths	26	103
Death-rate per 1,000, Rhondda . . . . .	.15	.66

The deaths from diarrhœa numbered 26, as compared with 27 in the preceding year.

The number of deaths, and the death-rate per 1,000 (.15) are only 25 per cent. of the corresponding averages for the years 1909-1918. Of the 26 fatal cases, 19 were under 1 year, 2 between the ages of 1 and 2, 2 were over 2 and under 5 years, and 3 were 45 years of age and upwards. No deaths from diarrhœa were recorded in Wards 5 or 7.

PUERPERAL FEVER.

Average for
Ten Years.

	1919.	1909-1918.
Number of Cases... ..	7	15
Number of Deaths	5	7
Death-rate per 1,000, Rhondda ... ..	.03	.05

There were 7 cases of puerperal fever notified during the year, this being the lowest number recorded for a similar period since the disease became notifiable in 1894.

Five of the cases proved fatal, a fatality of 71 per cent. of cases and a mortality rate of 0.03 per 1,000 of the population being thus occasioned. The latter has been equalled only on four occasions during the last 25 years

Puerperal fever being a disease which can affect parturient women only, the number of susceptible persons corresponds with the number of births, and the following table gives the number of cases and the number of deaths per 1,000 births since 1910.

Year.	Notifications per 1,000 Births.	Deaths of Mothers per 1,000 Births.
1910.	2.3	1.2
1911.	2.2	1.4
1912.	2.8	0.9
1913.	3.6	2.3
1914.	3.6	1.2
1915.	4.6	1.6
1916.	2.2	1.8
1917.	2.4	1.7
1918.	2.0	0.9
1919.	1.6	1.1

TUBERCULOSIS.

The total number of deaths throughout the year from all forms of tuberculosis amounted to 148, equivalent to a death-rate of .83 per 1,000 of the living population, the figures for 1918 being, respectively, 177 and 1.20.

Tuberculosis ranks fifth amongst those diseases which caused the greatest number of deaths during the year.

PULMONARY TUBERCULOSIS.

	Average for Ten Years.
1919.	1909-1918.
Number of Cases	199
Number of Deaths	116 122
Death-rate per 1,000, Rhondda	.66 .79

During the year 199 cases of pulmonary tuberculosis were notified, as compared with 236 in the previous year. Both the number of deaths—116,—and the death-rate per

1,000—0.66—are lower than the averages for the ten years 1909-1918, the death-rate per 1,000 having been less on only one other occasion,—0.62 in 1906.

Wards 3 and 4, with 5 and 11 cases respectively, provided the smallest number of notifications; Ward 10, with 28, the largest number, the figures for the other Wards ranging from 17 in Ward 1 to 26 in Wards 8 and 9.

As many as 82 per cent. of the notifications received were in respect of persons between the ages of 15 and 65 years, 39 per cent. being in the age group 25 to 45.

With regard to the deaths due to this disease, 95 per cent. were between the ages 15 and 65, and 41 per cent. were from 25 to 45 years of age.

Of the total number of deaths of persons between the ages of 25 and 45 years, 14 per cent. were due to pulmonary tuberculosis.

NON-PULMONARY TUBERCULOSIS.

Number of Cases	84
Number of Deaths	32
Death-rate per 1,000, Rhondda ... ..	.18

The cases of tuberculosis of parts other than the lungs notified during the year numbered 84, with 32 deaths, and a death-rate of 0.18 per 1,000. The corresponding figures for the previous year were 93, 37, and .25 respectively.

Ward 6, with only 2 notifications, contributed the smallest number, the largest being 17 in Ward 10.

VENEREAL DISEASES.

Arrangements for the free treatment of patients and provision of facilities for diagnosis available for all medical practitioners continued under the scheme of the Glamorgan County Council, who administer the Public Health (Venereal Diseases) Regulations, 1916, throughout the Administrative County. That authority has taken steps to establish *ad hoc* Clinics at Pontypridd, Port Talbot, and Barry. The first-named is already open for the treatment of patients at the time of writing, and best serves the needs of the Rhondda in this respect.

INFLUENZA.

Number of Deaths	195
Death-rate per 1,000, Rhondda	1.1

Following the abatement of the epidemic of influenza, which was noticed during December 1918, when 62 deaths were recorded, the 10 deaths which occurred in January were little more than the normal for the time of the year. There was, however, towards the end of the month, some evidence of a recrudescence of the disease, and during the weeks ended February 15th, February 22nd, and March 1st, the deaths recorded were 11, 21, and 26 respectively, the total for February reaching 60.

During March 55 deaths were certified as due to influenza, in April there were 38, and a total of 32 during the remaining months of the year, the smallest number being one in the month of July.

The number of deaths and the death-rate per 1,000 of the living population are less than half the corresponding

figures for 1918, but are considerably in excess of the average numbers recorded during previous years.

The Wards most affected were Nos. 9, 7, 10 and 2, with 46, 30, 25, and 23 deaths respectively, the remaining Wards contributing totals which varied from 8 in Ward 5 to 18 in Ward 6. Thirty-eight per cent. of the deaths were of persons between the ages of 25 and 45, 21.5 per cent. between 45 and 65, 14.3 per cent. over 65, 10.8 per cent. were between 15 and 25, and the remaining 15.4 per cent. were of those below the age of 15 years.

Contrary to the experience in the epidemic of 1918, the number of deaths of males exceeded those of females, the figures being 105 and 90, and in only one age-group (under 1 year) was this order reversed, although in the age-groups 25 to 45, and 65 years and upwards, the numbers of fatalities were equal in the two sexes.

From the 28th February to the 31st March inclusive, all cinemas in the district were called upon to exclude from their performances all children under 14 years of age, owing to the prevalence of influenza, power to do so being conferred by the following clause inserted by the Council in the Cinematograph Licences granted by them.

“ The acceptance of this Licence by the Licensee shall be considered proof of an undertaking on his part that, if notice is given by the Clerk to the Council to the Licensee that the Medical Officer has certified that there is an unusual prevalence of infectious disease in that part of the district in which the within-mentioned building and premises are situate, children under the age of 14 years shall not be admitted to the exhibition during the period of such prevalence, which period shall be deemed to continue until the Medical Officer has further certified that risk of in-

fection through the admittance to the exhibition of children under the age of 14 years has ceased."

The Public Health (Influenza) Regulations (Nos. 1 and 2), 1918, under which it was possible to exclude children from cinemas during periods of school closure, were rescinded as and from the 6th May, 1919.

In anticipation of further outbreaks of influenza in this country the Ministry of Health circulated memoranda upon the prevention of this disease, and recommended the measures given below for the consideration of sanitary authorities as worthy of adoption where possible on the outbreak of an epidemic:—

1. The appointment by the authority of a small emergency committee (e.g., three members of the Public Health Committee) to whom, with the Medical Officer of Health, should be delegated full powers to act and incur necessary expenditure.
2. Medical practitioners and any voluntary health workers in the district to be consulted through their respective local organisations, and their co-operation invited in determining the practical methods to be adopted.
3. A scheme as regards the provision of nursing and other assistance to families stricken with influenza to be formulated, such scheme to be carried out under the direction of the Medical Officer of Health.
4. Division of the town or district for this purpose into areas, to each of which one or more trained nurses are allotted for domiciliary nursing, the nurses to act in regard to individual patients solely under the direction of the medical practitioner in charge of the case.

5. Women to be enlisted as "home helps" to assist with cooking, care of children and ordinary domestic work. Inquiries to be made to ascertain where such assistance is most urgently needed.
6. Utilisation to the best advantage of Health Visitors and other members of the staff of the authority and of institutions under the control of the Council; improvisation of temporary crèches and of special kitchens in which food and invalid diet can be prepared.
7. Allocation to influenza patients of one or more wards in the isolation hospital or in some other available and suitable emergency hospital.
8. Issue of notices and leaflets to the public.
9. Prevention or mitigation of overcrowding, and securing adequate ventilation in public buildings or conveyances under the control of the Council.
10. School closure may be specially useful in rural and smaller urban districts.
11. The supply to medical practitioners of anti-influenza vaccine, obtainable from the Ministry of Health, and distributed through the Medical Officer of Health.

RABIES.

In consequence of the existence of Rabies or Hydrophobia in many parts of the country, including Glamorganshire, a circular letter was addressed to all medical men practising in the district to invite them to supply early information concerning any instances of patients bitten by a dog or other animal.

Two cases were brought to the notice of the Health Department during the year. An examination of the first proved the suspicion to be groundless.

On August the 2nd information was received from the Ministry of Health that a dog which had bitten a man on the hand at Porth on the 31st of July was ascertained to be suffering from rabies. Advantage was at once taken of facilities for anti-rabic treatment provided by the Ministry of Health at certain centres throughout the country and arrangements were immediately made for the man's daily attendance at Cardiff where the treatment was continued for a period and no ill-effects followed the bite. In this instance certain monetary allowances were made by the Council to the patient to enable him to undergo treatment in accordance with the authority conferred by the Ministry of Health in an Official Order.

LOUSINESS AND ITCH.

The attention of local authorities was directed to the above conditions by means of a Circular and Memorandum issued by the Local Government Board in February, 1919. The part played by lice in the spread of typhus fever, relapsing fever, and trench fever became evident during the war, and steps were taken by the Army Authorities to ensure that all men returning home on leave or demobilization were disinfested and supplied with clean clothing.

Having regard to the large number of Rhondda men on national service, leaflets bearing upon the causation, prevention and treatment of these conditions were drawn up and issued to Sanitary Inspectors and Health Visitors for distribution where necessary.

PUBLIC HEALTH (PNEUMONIA, MALARIA, DYSENTERY, ETC.) REGULATIONS, 1919.

These regulations, which came into operation on March 1st, 1919, are of much importance, in that Acute Primary Pneumonia, Acute Influenzal Pneumonia, Malaria, Dysentery and Trench Fever are, for the first time, made compulsorily notifiable and authority is given for dealing, in an effective manner, with patients suffering from the last three.

In addition, the scope of administrative action in respect of Enteric Fever, Typhus Fever and Relapsing Fever is extended, these three diseases being already notifiable under the Infectious Disease (Notification) Acts. In connexion with this group of diseases, it is of interest to note (1) that "flies" and human carriers are, in many instances, responsible for the spread of infection in Enteric Fever and Dysentery; (2) the relationship of Malaria to a certain variety of mosquito which is not unknown in these parts; and (3) the part played by the louse in conveying the infection from the sick to the healthy in the case of Trench, Typhus, and Relapsing Fevers.

The most important provisions of the Regulations are as follow :—

"Notice of provisions of Regulations."

ARTICLE IV.—The Local Authority shall forthwith cause notice to be given to all Medical Practitioners resident or practising within the District of the Local Authority of the duties imposed upon them by these Regulations.

**Notification of Malaria, Dysentery, and Trench Fever,
and of Acute Primary Pneumonia and Acute
Influenzal Pneumonia by Medical Practitioners.**

ARTICLE V.—Subject to the provisions of these Regulations, and subject to the provisions of Section 5 of the Local Government (Emergency Provisions) Act, 1916, every Medical Practitioner, as soon as he becomes aware that a person upon whom he is in professional attendance is suffering from Malaria, or Dysentery, or Trench Fever, or Acute Primary Pneumonia, or Acute Influenzal Pneumonia, shall forthwith make and sign and send or deliver to the Medical Officer of Health a notification of the case in the form and containing the particulars set forth in Schedule A. or Schedule B. as the case may be, of the Public Health (Notification of Infectious Disease) Regulations, 1918, and shall transmit the notification to the Medical Officer of Health for the District:

Provided that a Medical Practitioner shall not be required to notify a case of Malaria, or Dysentery, or Trench Fever, under this Article, and shall not be paid a fee for so doing if the case has already to his knowledge been notified under these Regulations or under the infectious Disease (Notification) Act, 1889, within the period of six months immediately preceding the date on which he first becomes aware of the disease in that case.

Duties of Medical Officers of Health.

ARTICLE VI.—A Medical Officer of Health on receipt of a notification under these Regulations in relation to a case occurring in a place which is not in his District shall forthwith notify the Medical Officer of Health of the District in which the place is situated.

ARTICLE VII.—Upon the receipt of a notification under these Regulations, or on becoming aware in any

other way of a case or suspected case of Malaria, or Dysentery, or Trench Fever, or Acute Primary Pneumonia, or Acute Influenzal Pneumonia, in his District, the Medical Officer of Health, or an Officer of the Local Authority acting under the instructions of the Medical Officer of Health, shall make such inquiries and take such steps as are necessary or desirable for investigating the source of infection, for preventing the spread of infection, and for removing conditions favourable to infection, and if a Medical Practitioner is not in attendance on the patient, the Medical Officer of Health shall also take such steps as are necessary or desirable for ascertaining the nature of the case.

ARTICLE VIII.—The Medical Officer of Health, on becoming aware of the occurrence within his district of—

- (a) a case of Trench Fever, or
- (b) a case of Malaria in which he has reason to believe that the infection was contracted in the United Kingdom,

shall immediately send to Us the name and address of the patient.

On becoming aware of an outbreak of Dysentery in his District, he shall immediately send to Us the names and addresses of the persons affected, and thereafter such particulars as We may require with regard to cases occurring subsequently.

If the District is not a County Borough he shall send the like information to the Medical Officer of Health of the County in which his District is situated.

ARTICLE IX.—In every case of Malaria, Trench Fever, or Dysentery in his District of which he becomes aware, the Medical Officer of Health shall take such steps as appear to him to be necessary and practicable to secure the treatment of the case in a suitable hospital, unless he is satisfied that treatment elsewhere than in a hospital will be carried out with all such precautions as are necessary to prevent the spread of the disease.

Malaria.

ARTICLE X.—In every case of Malaria occurring in his District of which the Medical Officer of Health becomes aware and in which he considers that action is necessary to prevent the spread of infection, he shall take all practicable steps to ensure that the person suffering from Malaria:—

- (1) is supplied with efficient mosquito netting;
- (2) receives necessary quinine treatment;
- (3) receives proper advice as to the continuation of quinine treatment in order to prevent relapses, and
- (4) receives proper advice as to the precautions to be taken to prevent the spread of infection.

ARTICLE XI.—On the occurrence within a District of two or more cases of Malaria in which the infection has, in the opinion of the Medical Officer of Health, been contracted within the District, the Local Authority may and if required by Us shall appoint and pay a Medical Practitioner approved by Us who shall:—

- (1) Make systematic visits to houses where Malaria has occurred or where risk of malaria infection arises, and shall offer to examine persons therein who are suspected of being infected with Malaria and shall endeavour to obtain material for micro-

scopic examination in order to determine whether malarial infection is present, and

- (2) secure that effective measures are taken to prevent the spread of infection by the administration of quinine, by the use of mosquito netting, and by the destruction of mosquitoes, and otherwise.

Dysentery.

ARTICLE XII.—(1) In any case of Dysentery occurring in his District of which the Medical Officer of Health becomes aware, and in connection with which he is of opinion after inquiry that such a course is necessary to prevent the spread of infection, he may by notice in writing require that, until a further notice in writing is given by the Medical Officer of Health revoking the first-mentioned notice on the ground that the risk of infection is removed—

- (a) the person specified in the notice shall discontinue any occupation connected with the preparation or handling of food or drink for human consumption.
- (b) children in the care or charge of any person specified in the notice shall not be sent to school.
- (c) suitable measures to be specified in the notice shall be taken with respect to cleansing, disinfection, disposal of excreta, destruction of flies, and prevention of contamination of articles of food or drink for human consumption.

(2) The notice may be addressed to the head of the family to which the patient belongs, or to any person in charge of or in attendance on the patient, or to any other person in the building or place of which the patient is an inmate, or to the occupier of the building or place,

(3) It shall be the duty of the person to whom any such notice is addressed to comply with the requirements of the notice.

ARTICLE XIII.—(1) If a Medical Officer of Health has grounds for suspecting that any person in the District who is employed in any trade or business concerned with the preparation or handling of food or drink for human consumption is a carrier of dysentery infection, he may give notice in writing to the responsible manager of the trade or business concerned certifying that for the purpose of preventing the spread of the disease he considers it necessary to make a clinical examination of such suspected person, and the responsible manager and all other persons concerned shall give to the Medical Officer of Health all reasonable assistance in the matter.

(2) If from the result of any such examination, or from bacteriological or protozoological examination of material obtained at any such examination, or from any other evidence which he may deem sufficient for the purpose, the Medical Officer of Health is of opinion that the specified person is a carrier of dysentery infection, the Medical Officer of Health may give a notice in writing to that effect to the responsible manager and to the suspected person with a view to preventing, during a period to be specified in such notice, the employment of the person to whom the notice relates in the conduct of the trade or business, or in any other trade or business concerned with the preparation or handling of food or drink for human consumption.

(3) It shall be the duty of the person to whom any such notice is addressed to comply with the requirements of the notice.

Trench Fever.

ARTICLE XIV.—(1) In any case of Trench Fever occurring in his District of which the Medical Officer of Health becomes aware, and in which he is satisfied that it is necessary, he may, by notice in writing, require—

(a) that such measures as may be specified by him shall be immediately taken to his satisfaction to obtain the complete destruction of lice on the person and clothing of every occupant of the building, and to secure the destruction of lice or their products in the building;

(b) the temporary segregation, for a period to be specified in the notice, of other inmates of the building or of other persons recently in contact with the patient until their persons and clothing have been completely freed from lice.

(2) The notice may be addressed to the head of the family to which the patient belongs, or to any person in charge of or in attendance on the patient, or any other person in the building of which the patient is an inmate, or the occupier of the building, and also to a person with whom the patient has recently been in contact.

(3) It shall be the duty of the person to whom any such notice is addressed to comply with the requirements of the notice.

Enteric Fever.

ARTICLE XV.—The provisions of Articles XII. and XIII. of these Regulations shall apply and have effect with the necessary modifications in any case of Enteric Fever occurring in the District and to any person residing

or employed in the District in regard to whom the Medical Officer of Health has grounds for suspecting that such person is a carrier of enteric fever infection in like manner and circumstances as those provisions respectively apply and have effect in any case of dysentery and to any person suspected to be a carrier of dysentery infection.

Typhus Fever and Relapsing Fever.

ARTICLE XVI.—The provisions of Articles VIII. and XIV. of these Regulations shall apply and have effect with the necessary modifications in any case of Typhus Fever or of Relapsing Fever occurring in the District in like manner as those provisions apply in any case of Trench Fever.

Duties of Local Authorities.

ARTICLE XIX.—(1) The Local Authority may provide or contract for the provision of medical assistance for any person in the District who is suffering from any of the diseases mentioned in these Regulations and is in need of such assistance.

(2) Where any suitable hospital or place for the reception of the sick is provided within the District of a Local Authority, or within a convenient distance of such District, any person who is suffering from Malaria or Dysentery, or Trench Fever, and is without proper lodging or accommodation, or is lodged in a room occupied by more than one family, or is on board any ship, vessel, or boat, or is lodged in any common lodging-house, or is in any place where such person cannot be effectively isolated so as to prevent the spread of the disease, may, on a certificate signed by the Medical Officer of Health, and with the consent of the superintending body of such hospital or place, be removed to such hospital or place at the cost of the Local Authority."

ACUTE PRIMARY PNEUMONIA.

Number of Cases	222
Number of Deaths... ..	180
Death-rate per 1,000, Rhondda	1.0

As a result of the Public Health (Pneumonia, Malaria, Dysentery, &c.) Regulations, 1919, acute primary pneumonia, in common with the other diseases covered by the Regulations, was made compulsorily notifiable from the 1st March, 1919, and during the remaining portion of the year 222 notifications were received.

The number of deaths attributed to pneumonia during the whole of the year amounted to 180 but the figure for the 10 months during which compulsory notification was in force was 117, or 53 per cent. of the cases notified.

During the ten months in which acute primary pneumonia was notifiable, the largest numbers of cases occurred in October, March, and November, with 35, 31, and 31 cases, and the smallest in August, September, June, and December with totals of 14, 14 15 and 15 respectively.

Wards 10, 9, 7, and 4 were most affected, the corresponding numbers being 43, 39, 32, and 26, while Wards 3 and 1, with 8 and 9 cases respectively, contributed the smallest numbers. Each of the age groups 0-1, 5-12, 25-45, and 45-65 contributed from 14 to 16 per cent. of the total notifications, and 37.4 per cent. were under 5 years.

ACUTE INFLUENZAL PNEUMONIA.

Number of Cases	194
Number of Deaths	114
Death-rate per 1,000, Rhondda ... ..	.64

This disease became compulsorily notifiable on the 1st March, 1919, and between that date and the end of the year 194 cases were notified. The number of deaths (114) referred to above is that for the whole year whereas the number registered after notification became compulsory amounted to 74, or 38 per cent. of the cases notified.

No very accurate conclusions can be drawn from the incomplete figures available during 1919, but, as might be expected, 85 per cent. of the notifications were received during March and April, the period of greatest prevalence of influenza being February, March and April.

The Wards which contributed the largest number of cases were 9, 10, 6 and 7, with 73, 32, 20 and 19 notifications respectively, while Wards 5 and 4, with 4 and 5 respectively, were least affected. The number of deaths in each Ward was in proportion to the number of notified cases occurring therein.

MALARIA.

Number of Cases	57
Number of Deaths	—
Death-rate per 1,000, Rhondda	—

The number of cases of Malaria notified since March 1st was 57. In no instance was the disease acquired in this country, and the following tables give the ages of those notified and the foreign stations in which the disease was contracted while on active service. There is therefore no evidence to be drawn from our experience that the disease is capable of being conveyed from the sick to the healthy under the conditions which obtained in the Rhondda in the course of the year.

NOTIFICATIONS OF MALARIA RECEIVED
DURING 1919.

Wards.	15 to 25 Years.	25 to 45 Years.	45 to 65 Years.	Totals.
1	—	2	—	2
2	—	1	—	1
3	—	2	—	2
4	5	3	—	8
5	4	2	1	7
6	—	1	—	1
7	—	2	—	2
8	2	10	—	12
9	3	16	1	20
10	1	1	—	2
Rhondda	15	40	2	57

SOURCES OF INFECTION.

Salonika	23
Mesopotamia... ..	15
Egypt	8
India	4
East Africa	3
Serbia	2
Macedonia... ..	1
Palestine	1
Total	57

DYSENTERY.

Number of Cases... ..	1
Number of Deaths	—
Death-rate per 1,000, Rhondda... ..	—

One notification of recurrent dysentery was received in March, the patient being a soldier of 40 years of age who contracted the disease in Salonika in May, 1918.

TRENCH FEVER.

No notification of trench fever was received during the year.

COLLIERY FATALITIES.

Number of Deaths	47
Death-rate per 1,000, Rhondda... ..	.26

The number of deaths caused by colliery accidents was 47, equivalent to a death-rate of .26 per 1,000, the corresponding figures for 1918 being 66 and .45 respectively.

The average number of colliery fatalities during the last ten years was 59.

INQUESTS.

Total in 1919... ..	116
Rate per cent. of Deaths... ..	5.7

The inquests held during the year numbered 116, and 5.7 per cent. of the total deaths were certified by coroners.

THE TYNTYLA ISOLATION HOSPITAL.

There was no material alteration during the year in the conditions and arrangements at the hospital, the accommodation providing for the reception and treatment

simultaneously of three infectious diseases in the following proportions:—

	Ordinary Beds.	Observation Beds.
Diphtheria	20	2
Typhoid Fever	20	2
Scarlet Fever	34	2
	<hr/> 74	<hr/> 6

There is in addition accommodation for eight, or ten patients in the small building formerly constituting the isolation hospital for the whole area.

The total number of patients admitted to the hospital in the course of the year 1919 amounted to 388, whereas the numbers for the seven immediately preceding years were 179, 231, 385, 441, 344, 398 and 314 respectively.

The following table furnishes a summary of the number of cases treated, the number of deaths from each disease, and the fatality which resulted from each of the diseases treated during 1919.

	No. of Cases.	No. of Deaths.	Mortality per cent.
Diphtheria... ..	134	6	4.5
Typhoid Fever... ..	24	*6	25.0
Scarlet Fever	230	2	0.9
	<hr/>	<hr/>	<hr/>
Totals ...	388	14	3.6

*Of the six deaths included above in the figures relating to typhoid fever only three were certified as having been due to that disease, the other three having been attributed to tuberculous meningitis, meningitis (not tuberculous), and pneumonia respectively.

Below is given a table to show the mortality rate of hospital-treated cases as compared with that of patients treated at their own homes, and also the case-mortality for the whole area, both groups of cases included.

	Whole District.			Hospital Cases.			Rest of Dist. (Hospital excluded.)		
	Cases	Deaths	Mortality per cent.	Cases	Deaths	Mortality per cent.	Cases	Deaths	Mortality per cent.
DIPHTHERIA (including membranous croup) ...	203	19	9.4	134	6	4.5	69	13	18.8
TYPHOID FEVER (including continued fever) ..	26	5	19.2	21	3	14.3	5	2	40.0
SCARLET FEVER ...	440	4	0.9	230	2	0.9	210	2	1.0
	669	28	4.2	385	11	2.9	284	17	6.0

The above figures do not include three cases notified and admitted to hospital as suffering from typhoid fever and later certified as having died from tuberculous meningitis, meningitis (not tuberculous) and pneumonia respectively.

Each district ward, to the extent given in the sub-joined table, contributed to make up the total number of patients admitted to the hospital.

RECOVERED CASES.				FATAL CASES.		
Ward.	Diph-theria.	Typhoid Fever	Scarlet Fever.	Diph-theria.	Typhoid Fever.	Scarlet Fever
1	18	1	63	0	0	0
2	8	0	26	2	1	2
3	13	2	6	1	0	0
4	5	9	9	1	2	0
5	8	2	22	0	0	0
6	15	1	25	0	3	0
7	13	2	19	1	0	0
8	15	0	7	1	0	0
9	24	1	45	0	0	0
10	9	0	6	0	0	0
TOTALS.	128	18	228	6	6	2

The average time spent in hospital by recovered cases was 45 days in the case of diphtheria (with extremes varying from 21 to 154 days), 67 in the case of typhoid fever (between the limits of 26 and 137 days) and 48 in the case of scarlet fever (with extremes of 17 and 136 days). For the cases which terminated fatally, the average time in hospital was 14 days in diphtheria (from 1 to 46 days), 11 days in typhoid fever (from 4 to 36 days), and 31 days in scarlet fever (18 and 43 days respectively).

Tradesmen continued to be averse from pledging themselves to provision the hospital for a considerable period by contract or otherwise owing to the precariousness of the supplies and the great fluctuation in prices, the upward movement of which continued in the course of the year. The Council had therefore to resort to the open market in order to meet the daily needs of the hospital by short-term purchases at the prices ruling for the time being. This method involved the exercise of constant vigilance and forethought by and the exposure to much anxiety of those immediately responsible for the efficient management and maintenance of the hospital during a year of more than normal stress. The long experience and unremitting attention of the Matron (Miss R. E. Smith) were mainly instrumental in successfully tiding over the difficulties inseparable from these circumstances. Notwithstanding these circumstances there was a reduction of the maintenance rate per patient per week from £3 3s. 7d. in 1918 to £1 16s. 6d. in 1919, if the sum of £202 for repairs to buildings be excluded from the calculation. The much larger number of patients accommodated at the hospital in the latter year contributed considerably to this reduction per head.

STATEMENT OF EXPENDITURE IN 1919.

	£	s.	d.
Salaries and Wages	1337	18	5
Health Insurance Contributions	15	6	11
Bread	160	7	3
Eggs	22	19	2
Fish	60	10	0
Fruit and Vegetables	118	19	8
Milk	644	16	5
Meat	405	12	5
Groceries	516	9	6
Stimulants (Brandy, &c.)	21	4	0
Drysaltery (Soap, Polishes, &c.)	90	0	5
Drugs, Instruments, &c.	237	18	0
Methylated Spirits, Turpentine, &c.	4	13	4
Gas	62	10	9
Electricity	124	15	11
Water	33	12	2
Gas, Water, and Electricity Repairs	18	2	11
Fuel	344	14	2
Horse Feed, Shoeing, Saddlery, &c.	120	13	10
Advertisements	8	3	3
Stationery, Printing, &c.	16	15	1
Postages, Fares, and Carriage	3	8	1
Telephone Charges (Maintenance, &c.)	15	0	4
Insurances (Boiler, &c.)	36	9	4
General District Rate	61	2	10
Poor Rate	79	4	2
Crockery, Drapery, &c.	61	8	8
Ironmongery	9	19	4
Brushes, &c.	25	14	2
Ambulance Repairs	1	19	0
Repairs to Cart	2	11	0
Boiler Repairs	4	10	6
Machinery Repairs or Renewals	3	1	3
Garden Requisites and Labour	39	15	8

Statement of Expenditure in 1919—continued.

	£	s.	d.
Sundries 	6	17	7
	<hr/>		
	£4717	5	6
General Repairs to Buildings 	202	6	0
	<hr/>		
	£4919	11	6
	<hr/>		

PENRHYS ISOLATION HOSPITAL.

There was no occasion to utilize the Penrhys Isolation Hospital, which has accommodation for 20 beds in two separate blocks, for the reception of one or more cases of small-pox in the course of the year, but the institution is always being held ready for such use at short notice.

SCAVENGING AND REFUSE DISPOSAL.

The year 1919 witnessed a continuance of the retrogression in the thoroughness, regularity and frequency with which the refuse of the district has been collected during the years of war. The conditions did not render it possible to allow a strict application of the specifications laid down by the Council, and considerable laxity in the infliction of the penalties provided for in the terms of contract was unavoidable under the circumstances which obtained throughout the year.

The refuse destructor at Dinas forms an integral part of the Council's Electricity Works under the management of Mr. J. M. Bowman, and disposes of from 60 to 80 tons of refuse a day, the heat thus derived being utilized for the generation of steam. The greater quantity of the

refuse, however, is still deposited at various depôts throughout the district. These refuse dumps are, however, being gradually reduced in number from year to year, and in 1919 only eight were in constant use. While this progressive concentration of the practice has the advantage of reducing the centres of nuisance and annoyance thus caused it has the disadvantage of adding to the cost of haulage which is to some extent responsible for the considerably higher amount thus spent in 1919 as compared with all preceding years.

According to information obtained from the department of Mr. E. H. Barber, Surveyor and Engineer to the Council, the total cost of the collection of house refuse and of its cartage to the various tips or to the destructor amounted during the year ended September 30th, 1919, to £22,887 11s. 4d., including the cost of dealing with districts 10, 11, 16, 19, 20, 21, 22, and 23, which are scavenged by the Council by direct labour. The total amount is equivalent to an expenditure of 16/2 per house, as compared with 8/-, 6/-, 5/6, 4/-, 4/4, 4/6, 6/10.7, 4/10, 5/2, 5/3.4, 4/9.4, 6/2.1, 7/0.4, 7/0.9, 8/-, 8/8.7, 11/2, and 12/6 for the years 1902-3 to 1918-19 respectively.

DRAINAGE AND SEWERAGE.

In 1892 a main sewer was laid by the Joint Board of the Pontypridd and Rhondda Urban District Councils and discharges into the sea between Cardiff and Newport, after running a course of about 17 miles. Subsidiary sewers have been steadily laid since that year in all portions of the Rhondda District so that, with comparatively few exceptions, the houses within the area are connected with the sewer.

These sewers, in common with other pipes laid in the ground, have in places suffered serious damage from the effects of subsidence and at the time of writing a large section of the main subsidiary sewer passing through the southern end of the district (Hafod) is now being relaid after sanction from the Ministry of Health following a temporary suspension of the work owing to the war.

Steps have also been taken to lay a subsidiary sewer for the sewerage of a group of unconnected houses at Appletree, Dinas, and this work is being carried out concurrently with a general overhaul under the Housing Acts of the houses to be connected to the new sewer when laid.

The number of houses within the Urban District still unconnected with the sewerage system amounts to 277, as compared with 291 at the end of the previous year, 290 at the end of 1917, and 4,290 in 1897. The distribution of those still remaining unconnected is shown in the subjoined table:—

Sanitary District No. 1 contains 21 unconnected houses.

„	2	„	12	„
„	3	„	58	„
„	4	„	63	„
„	5	„	53	„
„	6	„	70	„

The extent and character of the means of excrement disposal throughout the Rhondda Urban District at the end of 1919 are set out in the appended table, which is a summary of the returns and reports furnished periodically by the sanitary inspectors.

No. of Privies with fixed receptacles (middens, cesspits)	52
No. of Privies with moveable receptacles (pails)	81
No. of Water Closets (fresh water, cistern-flushed)	24,412
No. of Water Closets (waste water)	—
No. of Water Closets (hand flushed)	3,477

SANITARY INSPECTION OF DISTRICT.

The number of inspections and re-inspections made during the year amounted to 24,761. These were as follows:—

Inspections under The Housing, Town Planning,						
&c. Acts	...	...	...	...	...	1,397
Cases of Infectious Disease investigated	...	...	...	...	...	717
Revisits to:—						
Infected Houses	...	...	...	...	...	2,199
Unabated Nuisances and Unremedied Defects	...	...	...	...	...	16,877
Slaughter Houses	...	...	...	...	...	1,017
Lodging Houses	...	...	...	...	...	354
Bakehouses	...	...	...	...	...	628
Dairies	...	...	...	...	...	290
Factories and Workshops	...	...	...	...	...	558
New Buildings (drains of)	...	...	...	...	...	244
Special complaints received	...	...	...	...	...	480

Of the 3,986 notices served under the several Acts relating to the abatement of nuisances or for the contravention of bye-laws during the year, 2,816 were preliminary or intimation notices, while the remaining 1,170 were statutory notices, 122 of which remained uncomplished with at the close of the year.

In the course of the year it was found necessary to prosecute 10 owners in respect of 26 houses for non-compliance with the requirements of the Council. Particulars of these are given in another section of this report (pages 75 to 77).

PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS OR REGULATIONS.

There are 405 premises in the district which are controlled by Bye-laws or Regulations. The number and character of such premises are given in table 52 of this report (cf. Appendix).

HOUSES LET IN LODGINGS.

Strictly speaking there are no houses let in lodgings throughout the urban area.

OFFENSIVE TRADES.

No offensive trades have been established within the Rhondda Urban District with the written consent of the Council under Section 112 of the Public Health Act, 1875.

COMMON LODGING-HOUSES.

The number of registered common lodging-houses in the district remained the same as in the previous year. There are 10 of these establishments in the district, one at Pentre, six at Ystrad, one at Penygraig, and two at Dinas, the total providing accommodation for 387 persons.

Frequent visits of inspection are paid to all the lodging-houses by Chief Inspector J. Towy Thomas, and by Inspectors D. B. Davies and G. Griffiths, in whose districts all the lodging-houses are situated. Speaking generally, they were found to be conducted satisfactorily. All houses are licensed for a period of twelve months, in accordance with the provisions of the Rhondda Urban District Council Act, 1905.

UNDERGROUND SLEEPING-ROOMS.

Subsequent to the passing of the Housing, Town Planning, &c., Act, 1909, the Council submitted Regulations to the Local Government Board, in pursuance of

Section 17 (7) of the Act, which were approved and received the Board's consent on the 24th of November, 1913. The outbreak of war and the resulting housing conditions made their application to the considerable number of under-tenements affected by the Regulations practically impossible. Five of these tenements, however, received considerable structural alterations and were rendered habitable in conformity with the approved Regulations.

REPORTS DURING THE YEAR.

In addition to the ordinary statistical matter the following subjects were dealt with in the reports placed before the Council during the year.

Building Sites available in the District.

Clerical Staff of the Health Department (2).

Closing Orders in operation three or more months.

Conference of Local Authorities re preparation of After-the-War Housing Schemes.

Determination of Closing Orders (4).

Disused Housing Accommodation in the District.

Dumping of Refuse on Ynys Park, Ton.

Employment of Children to perform work beyond their capacity.

Encephalitis Lethargica.

General Death-rate for 1919.

Home Helps.

Houses unfit for human habitation (6).

Houses without a proper Water Supply (3).

Housing Survey of the District.

Housing, Town Planning, &c., Act, 1919.

Infantile Mortality-rate for 1919.

Influenza (2).

Inspection of Midwives.

Lousiness and Itch.

Ministry of Health Bill.

Office Accommodation.

Office Typewriter.

Public Health (Cerebro-Spinal Fever) Regulations, 1918 and 1919.

Public Health (Influenza) Regulations (Nos. 1 and 2), 1918, Rescission.

Public Health (Measles and German Measles) Regulations, 1915, Rescission Order, 1919.

Public Health (Pneumonia, Malaria, Dysentery, &c.) Regulations, 1919.

Rabies (2).

Rag Flock Act, 1911.

Railway Side, Porth, Drainage, etc.

Rats and Mice Destruction (4).

Repair of Houses not in all respects reasonably fit for human habitation.

River Pollution at Llwynypia.

Salaries of the Fever Hospital Nurses.

Salaries of Health Visitors.

Small Pox.

Street Markets or Stalls.

Training of Midwives.

Wages of Hospital Workmen.

Water Supply of Clydach Vale (2).

Water Supply of Fernhill.

Water Supply of Gilfach Goch.

Water Supply of Pontygwaith.

ADOPTIVE ACTS.

The Infectious Disease (Notification) Act, 1889; The Infectious Disease (Prevention) Act, 1890; and the Public Health Acts (Amendment) Act, 1890, Part III., were adopted by the Rhondda Council from January 1st, 1894, and the Notification of Births Act, 1907, from April 28th, 1909.

UNSOUND FOOD.

During the year, the following were condemned as unfit for the food of man, and their use for such purpose prevented:—

Beef	...	...	...	...	..	3148 lbs.
Bovine organs	...	...	...	...	...	449 lbs.
Mutton	...	...	...	...	...	3047 lbs.
Bacon	...	...	...	...	...	6156 lbs.
Sausage	...	...	...	...	...	39 lbs.
Corned Beef	...	...	...	...	...	111 lbs.
Meat and Vegetables	...	...	...	...	...	2 tins.
Ox Cheek	...	...	...	...	...	1 tin.
Pork and Beans	...	...	...	...	...	1 tin.
Potted Meats	...	...	...	...	...	2 tins.
Rabbits	...	...	...	...	...	48
Rabbit	...	...	...	...	...	1 tin.

Fish	...	...	...	...	...	1997 lbs.
Kippers	...	...	...	...	...	28 lbs.
Cockles	...	...	...	...	...	336 lbs.
Herrings	...	...	...	...	...	2 tins.
Lobster	...	...	...	...	...	5 tins.
Pilchards	...	...	...	...	...	2 tins.
Prawns	...	...	...	...	...	5 tins.
Salmon	...	...	...	...	...	75 tins.
Sardines	...	...	...	...	...	2 tins.
Fish Paste	...	...	...	...	...	2 tins.
Cake	...	...	...	...	...	25 lbs.
Cheese	...	...	...	...	...	873 lbs.
Chocolates	...	...	...	...	...	36 lbs.
Coffee	...	...	...	...	...	2 tins.
Coffee and Milk	...	...	...	...	...	31 tins.
Condensed Milk	...	...	...	...	...	310 tins.
Do.	...	...	...	...	...	73 cwt.
Eggs	...	...	...	...	...	494
Honey	...	...	...	...	...	1 tin.
Jam	...	...	...	...	...	14 lbs.
Meat Extract	...	...	...	...	...	3 bottles.
Pickles	...	...	...	...	...	21 bottles.
Sauce	...	...	...	...	...	15 bottles.
Syrup	...	...	...	...	...	4 tins.
Carrots	...	...	...	...	...	1344 lbs.
Onions	...	...	...	...	...	100 lbs.
Potatoes	...	...	...	...	...	7392 lbs.
Swedes	...	...	...	...	...	112 lbs.
Tomatoes	...	...	...	...	...	940 lbs.
Do.	...	...	...	...	...	126 tins.
Apples	...	...	...	...	...	286 lbs.
Apricots	...	...	...	...	...	11 tins.
Peaches	...	...	...	...	...	3 tins.
Pears	...	...	...	...	...	7 tins.
Pineapple	...	...	...	...	...	7 tins.
Dates	...	...	...	...	...	7479 lbs.

Summary of Police Court Proceedings during 1919.

No.	COURT.	OFFENCE.	RESULT.
1	Ystrad	Failing to abate nuisances	Ordered to abate in 7 days, penalty of 5/- per day in default
2	Ystrad	Failing to abate nuisances	Ordered to abate in 7 days, penalty of 10/- per day in default
3	Ystrad	Failing to abate nuisances	Ordered to abate in 6 weeks, daily penalty of 2/6 per house in default
4	Porth	Failing to exhibit notice re mixed business	Fined £1
5	Porth	Selling Provisions after 7 p.m.	Fined £1
6	Ystrad	Employing a child under 11 years of age in street trading	Fined £1
7	Ystrad	Shop open after closing time	Fined £1
8	Ystrad	Selling Provisions after 7 p.m.	Fined 5/-
9	Ystrad	Failing to exhibit notice re mixed business	Payment of costs, 5/-
10	Ystrad	Employing a child under 11 years of age in street trading	Fined £1
11	Ystrad	Shop open after closing time	Fined £1
12	Ystrad	Shop open on weekly half-holiday	Fined 15/-
13	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday	Fined 15/-
14	Porth	Depositing Ashes on carriage way	Fined £1
15	Ystrad	Failing to abate nuisances	Ordered to abate in one month, penalty of 5/- per day in default
16	Porth	Failing to allow lawful intervals for meals	Fined 10/-
17	Ystrad	Failing to abate nuisances	Abated payment of costs
18	Porth	Depositing stale fish in river	Fined £2
19	Ystrad	Selling Provisions after closing time	Fined £1
20	Ystrad	Failing to abate nuisances	Ordered to abate in 21 days, penalty of 5/- per day in default and to pay costs
21	Ystrad	Failing to abate nuisances	Ordered to abate in 7 days, penalty of 5/- per day in default and to pay costs.
22	Ystrad	Failing to abate nuisances	Abated; payment of costs

Summary of Police Court Proceedings—*continued.*

No.	COURT.	OFFENCE.	RESULT.
23	Porth	Failing to exhibit notice as to hours of employment of a young person	Fined £1
24	Porth	Shop open after closing time ...	Fined 10/-
25	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half holiday ...	Fined 15/-
26	Ystrad	Shop open after closing time ...	Fined 10/-
27	Porth	Failing to abate nuisances ...	Abated; payment of Costs
28	Porth	Selling Provisions after 7 p.m. ...	Fined 30/-
29	Porth	Failing to exhibit notice re mixed business ...	Fined £1
30	Porth	Shop open after closing time ...	Payment of costs, 5/-
31	Porth	Shop open after closing time ...	Fined £1
32	Porth	Shop open after closing time ...	Fined 10/-
33	Ystrad	Shop open after closing time ...	Fined £2
34	Ystrad	Selling Provisions after closing hour	Fined £1
35	Ystrad	Selling Provisions after closing hour	Fined 10/-
36	Ystrad	Employing a child under 16 years of age in street trading after 9 p.m.	Fined £2
37	Ystrad	Employing a girl under 14 years of age in street trading not in the company of a parent or guardian	Bound over in the sum of £5 for 12 months; payment of costs 5/-
38	Ystrad	Employing a child under 11 years of age in street trading ...	Bound over in the sum of £5 for 12 months
39	Ystrad	Employing a child under 16 years of age in street trading after 9 p.m.	Payment of costs, 5/-
40	Ystrad	Employing a child under 16 years of age in street trading after 9 p.m.	Bound over in the sum of £5 and payment of costs 5/-
41	Porth	Carrying on the trade of house-furnishers in a place not being a shop after closing time ...	Fined £1
42	Ystrad	Employing a child under 16 years of age in street trading after 9 p.m.	Fined 15/-
43	Ystrad	Shop open after closing time ...	Fined 15/-
44	Porth	Selling Provisions after 7 p.m. ...	Fined 15/-
45	Porth	Shop open after closing time ...	Payment of costs, 5/-
46	Porth	Failing to exhibit notice as to hours of employment of a young person	Payment of costs, 5/-
47	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined £1
48	Porth	Slaughtering on Unlicensed or Unregistered premises ...	Fined 30/-
49	Porth	Failing to abate nuisances ...	Abated; payment of Costs
50	Porth	Shop open after closing time ...	Fined 15/-
51	Ystrad	Employing a child under 16 years of age in street trading on Sunday	Fined 10/-

Summary of Police Court Proceedings—*continued.*

No.	COURT.	OFFENCE.	RESULT.
52	Ystrad	Shop open after closing time ..	Payment of costs, 6/-
53	Ystrad	Carrying on the trade of Jeweller, Draper, etc., in a place not being a shop after closing time ...	Fined £1
54	Po th	Shop open after closing time ...	Payment of costs, 5/-
55	Ystrad	Shop open on weekly half-holiday	Fined 15/-
56	Ystrad	Selling Provisions after closing time	Fined 15/-
57	Ystrad	Employing a child under 14 years of age between 9 p.m. and 6 a.m.	Fined 10/-
58	Ystrad	Employing a child under 14 years of age between 9 p.m. and 6 a.m.	Fined 10/-
59	Ystrad	Failing to exhibit a notice as to hours of employment of a young person	Payment of costs 5/-

An analysis of the foregoing statement of Police Court proceedings during the year shows that 35 actions were instituted for offences under the Shops Acts, 11 for offences under the Employment of Children Act, 1903, and 13 under the Public Health Acts or Bye-laws made thereunder, viz.:—10 for failure to abate nuisances (involving 26 premises), 1 for depositing ashes on carriage way, 1 for throwing stale fish into the river and 1 for slaughtering on unlicensed premises.

DISINFECTION.

As in the case of recent years as much as possible of the disinfection required in the district throughout the year has been done by means of the "Equifex" Steam Disinfector which is installed at the Isolation Hospital at Ystrad. Aerial disinfection when required is carried out usually by means of formaldehyde gas or sulphur di-oxide or a combination of both, supplemented in exceptional cases by a spray of some suitable liquid disinfectant.

WATER SUPPLY.

In the course of the year 1919 no material change has to be recorded regarding the water supplies in the respective areas of distribution of the Council and the Pontypridd and Rhondda Joint Water Board or in the lesser and less important areas supplied from private and independent sources.

The district as a whole continues to be supplied from two main sources, the Council, in the main, supplying from Llyn Fawr and other supplementary supplies the Rhondda Fawr Valley as far as Penygraig on the one side and Trealaw on the other, whereas the remainder of the district is supplied by the Joint Water Board from Lluest Wen and Castell Nos reservoirs, situated at the head of the Rhondda Fach Valley.

Within each of the two areas there are localities or groups of houses supplied from independent sources, among the most important of such in the Council's area being Caroline Street, Blaenrhondda, and portions of Cwmpare, Ystrad, Llwynypia, and Clydach Vale, the total number of houses thus supplied amounting in the aggregate to over two thousand. Within the Joint Board's area there are smaller aggregations of houses independently supplied at Blaenllechau, Pontygwaith, Ynyshir, Hafod, Cymmer, Trebanog, and Penrhiwfer. All of these supplementary sources must be considered unsatisfactory on account of inadequate protection, insufficient storage, inefficient purification or unreliable distribution.

The works at Fernhill which have been put in train by the Council and which will serve for the adequate supply of Fernhill, Blaenrhondda, and Caroline Street, have been delayed by failure up to the present to obtain delivery of the mechanical pressure filters which form the

essential part of the plant. When installed these filters will be capable of supplying 120,000 gallons a day, a duplicate set being also provided for to meet any emergencies that may arise.

A very important development was foreshadowed in the course of the year regarding the water supply of Clydach Vale, which has hitherto been undertaken by the local colliery company (The Cambrian Colliery Company). The Council introduced a clause into their Parliamentary Bill deposited towards the end of the year for the purpose of repealing Section 26 of their Act of 1899, which conferred certain statutory powers upon the Colliery Company. Conferences took place between a special Committee of the Council and representatives of the Company with the result that a mutually satisfactory arrangement was arrived at whereby the Council will secure unrestricted and complete power to supply Clydach Vale after the passage of the Bill through Parliament.

The figures kept by Mr. Octavius Thomas, the Council's Gas and Water Engineer, record that 4 new services were laid on during the year within the Council's area and that the consumption per head of the population was 19.44 gallons a day of which 1.35 gallons were supplied for trade purposes, all water supplied by meter being included in this description.

ADMINISTRATION.

Owing to the demobilization rendered practicable after the Armistice Day (November 11th, 1918), all but two of the members of the staff who had been absent on war service had returned early in the year 1919 to resume their respective duties in the department. The two excep-

tions were Miss May Shelton, Assistant Matron, and Mr. H. T. Prothero, Clerk, both of whom accepted posts elsewhere. Nine of the permanent members of the department had seen service and, although Africa was the only war area in which the department was not represented, it is very gratifying that all escaped war wounds and while most of them received promotion in their respective spheres one (Mr. T. J. Rees, Chief Clerk) earned special distinction in the form of the Meritorious Service Medal.

MILK AND OTHER FOOD SUPPLIES.

The persons now engaged in the production, sale, or distribution of milk within the district consist of the following classes in the numbers indicated:—

Cowkeepers	...	...	...	...	...	...	20
Cowkeepers and Purveyors of Milk	...	...	...	...	...	...	30
Purveyors of Milk and Milkshop Keepers	...	...	...	...	...	...	114

As compared with the corresponding figures for the previous year, the first group shows an increase of four, the second a decrease of eight, and the third a decrease of eighteen. In opposition to these statistics there was a reduction in the amount of milk produced within the district of 66 gallons per diem, or 20.3 per cent., whereas the amount imported has increased to the extent of 114 gallons per diem, or 3.7 per cent., as compared with the previous year. It is also estimated that the cows within the district yielded an average of 258 gallons per diem while the relatively large amount of 3,163 gallons is daily imported from outside the area. Thus the total quantity of ordinary fresh cow's milk consumed in the district during the year amounted to 0.153 pint per diem for every individual, or a decrease of 0.03 pint on the previous year,

the amount per person for the six immediately preceding years (1913 to 1918) being, in fraction of a pint, 0.16, 0.16, 0.14, 0.13, 0.20, and 0.183, respectively.

The 164 premises concerned with the production and distribution of milk in the district were periodically visited during the year by the district inspectors under whose supervision they are placed.

The Food and Drugs Acts are administered throughout the Rhondda by the Glamorgan County Council, but general inspection and supervision under the Public Health Acts are being exercised by the Council's sanitary inspectors, nine of whom are in possession of the meat inspection certificate granted by the Royal Sanitary Institute. The premises where foods are manufactured, prepared, stored or exposed for sale are systematically inspected and such action as may be called for and as the provisions of the Public Health Acts and Orders made thereunder may authorize is taken. In this way a considerable quantity of food stuffs, including 952 lbs. of tuberculous meat, was destroyed in the course of the year (cf. table on page 78).

There are 148 bakehouses within the district but, generally speaking, they are small and the number of persons employed are few. Considerable improvements in design and in the appliances used have been recently introduced into many of them, the most modern bakehouses being fitted with draw-plate ovens, mixing and kneading machinery and electricity. There are no underground bakehouses as defined in the Factory and Workshop Act, 1901.

There are 28 private slaughterhouses in the Rhondda: four are registered, 8 licensed, and the remaining 16 are subject to annual licences. Powers were obtained by the Council in their Act of 1910 to acquire by agreement any

slaughterhouse within the district and to agree with the owner, lessee and occupier of any slaughterhouse for the abolition of slaughtering therein on such terms and conditions as may be arranged between the parties concerned. Unfortunately however the war and the consequent need for exceptional economy have served to postpone indefinitely the utilization of these powers, much though the necessity to do so is regretted having regard to the somewhat unusual circumstances obtaining in the district.

HOUSING.

I.—GENERAL HOUSING CONDITIONS.

1. At the end of the year under review there were 28,322 houses in the district. It is estimated that of these 26,827 were of a type suitable for the accommodation of the working classes. Only one house,—in Ward 7,—was erected and passed for occupation in the course of the year. Eight houses whose erection was suspended during the war still remained uncompleted at the end of the year. Out of a total of 166 plans of various kinds approved by the Council in 1919 only 10 were of dwelling-houses.

Moreover it was considered necessary to issue closing orders in respect of 22 houses and as only 9 were rendered fit for human habitation while seven were demolished and the ultimate fate of six remained in abeyance there was during the year a net decrease of the dwelling-house accommodation to the extent of six houses.

The appended table sets out the number of houses passed for occupation since the year 1898:—

In 1898 there were 317 new houses passed for occupation.

„ 1899	„	157	„	„	„
„ 1900	„	148	„	„	„
„ 1901	„	187	„	„	„
„ 1902	„	334	„	„	„
„ 1903	„	483	„	„	„
„ 1904	„	594	„	„	„
„ 1905	„	317	„	„	„
„ 1906	„	879	„	„	„
„ 1907	„	827	„	„	„
„ 1908	„	829	„	„	„
„ 1909	„	1,025	„	„	„
„ 1910	„	926	„	„	„
„ 1911	„	769	„	„	„
„ 1912	„	439	„	„	„
„ 1913	„	358	„	„	„
„ 1914	„	308	„	„	„
„ 1915	„	146	„	„	„
„ 1916	„	129	„	„	„
„ 1917	„	26	„	„	„
„ 1818	„	10	„	„	„
„ 1919	„	1 new house	„	„	„

2. The population as estimated by the Registrar-General was 177,911 at mid-summer. The average annual increase of population for the five years before the war amounted to 3,495. It is anticipated that the working class population will within the next three years increase by about 1,000 owing to industrial development and the consequent immigraton of that number into the district.

3. (a) It is estimated that during the term of years mentioned not fewer than 3,400 additional houses will be required to meet the needs of the inhabitants of the district, having regard to the natural growth of the population, existing overcrowding, the number of houses requir-

ing condemnation, and influx due to industrial developments.

This may be considered to be an irreducible estimate and there are at present indications that it may have to be increased owing to the extent to which some of the factors referred to are contributing to the growth of the population, notably a rise in the "natural increase" of the population owing to the greater disparity than recently experienced between the births and the deaths within the area. Much uncertainty also exists as to the extent to which the large number of families now sharing houses with other families will be able and prepared to incur additional expense and responsibilities by taking houses for their own and exclusive occupation when they become available. If it were assumed that all families thus situated would take this step, the estimated number of additional houses required for all purposes would be more than twice that just given.

(b) The Council's schemes for the provision of new houses under Section I. of the Housing, Town Planning, &c., Act, 1919, which have been submitted for approval to the local Housing Commissioner are limited to 88 houses at Penygraig, situated in the Rhondda Fawr Valley and approximately a hundred at Maerdy, at the head of the lesser valley. At each of these localities a site has been purchased by the Council. The chief obstacles to progress have been the difficulty in raising money, the scarcity of skilled labour and the inability to obtain the required material in sufficient quantities.

At the time of writing there are indications that some local contractors will undertake the erection of several small groups of houses throughout the district under Section 12 (3) of the Housing, &c., Act, 1919. In view of the great need however

the effective progress to be recorded has been disappointingly small, notwithstanding the efforts made by the Housing Committee of the Council.

II.—OVERCROWDING.

The tendency to overcrowding which existed before the war has since become much emphasized. Even on the basis of the figures obtainable after the census enumeration of 1911, it may be stated that 1,200 tenements in the district give lodgment to more than two persons per room. As a result of inspection of over a fourth of the houses in the district within recent years it may also be stated that between four and five thousand houses intended for the accommodation of single families have, without having been specially adapted for the purpose, become occupied by two or more families per house. The systematic house inspections that are being daily made for various reasons serve to show that the proportion of ordinary dwelling-houses that become occupied by more than one family is steadily increasing and it must continue to increase until the position can be relieved by the erection of approximately one thousand houses a year, the dearth of houses being the one important cause of the existing overcrowding. Having regard to this scarcity no effective action could be taken towards the abatement of overcrowding in the many instances discovered. Occasionally however it was found possible to bring about partial relief by a redistribution of families or individuals.

III.—FITNESS OF HOUSES.

The vast majority of the houses are comparatively new, commodious and fairly well built, usually of native Pennant sandstone but the number provided with baths forms a small minority and in design they too much tend to the exclusion of light and fresh air from the rooms in

rear of the houses, the existence of projections or extensions in rear of the buildings being general. Under these circumstances there is also a great tendency to cover the area in the angle between the projections and the main buildings with skeleton erections which seriously interfere with the lighting and ventilation of some of the rooms whose windows and doors thus become enclosed or obstructed.

The general character of the defects found in the inspected houses was such as would naturally arise in the form of general dilapidations attributable to inattention or neglect during the war years and commonly consisted of defective walls, roofs, doors and windows, insufficient or broken yard paving and dilapidated sanitary conveniences.

Of the 1,397 houses inspected and found defective, action had to be taken in respect of 423 of them under the nuisance clauses of the Public Health Act, 1875, the limitations imposed by Section 14 of the Housing and Town Planning Act, 1909, making such a course necessary. After the passing of the Housing, Town Planning, &c., Act, 1919, however, resort to the provision of the Public Health Act, 1875, became less necessary and was practically limited to securing the abatement of nuisances of an urgent or gross character, much use being made of the powers given by Section 28 of the Act of 1919.

Even before the war considerable difficulty was experienced by owners of property in obtaining skilled labour in the various building trades and, during the war years, became progressively greater and ultimately proved insurmountable. The position was further aggravated by the increase in the price of building material and by the restrictions imposed upon its purchase.

Having regard to these difficulties the Council have decided, under the provisions of the Housing Acts, 1890 to 1919, to themselves undertake, to a greater extent than formerly, the repairs of houses not in all respects reasonably fit for human habitation in instances where the owners fail to comply with the requirements of notices served upon them. Information concerning 115 such houses has been lodged with the Surveyor to the Council whose department is entrusted with this work, which is now proceeding in three portions of the district simultaneously.

Generally speaking an adequate water supply is available throughout the district, but in certain localities such as Clydach the Council are taking action to provide a better supply than that now existing. The district is well-sewered and drained, but the efficiency of many sewers is seriously impaired in certain localities by the effect of subsidence. The water-carriage system of drainage is general and only 133 houses throughout the district remain unconnected to the sewer, many of these being in outlying situations. During the war the daily collection of house refuse previously practised was superseded by collections on three days a week, but it is intended to revert to the old arrangements as soon as the conditions permit. From 60 to 80 tons of the refuse thus daily collected are burnt at the Council's refuse destructor at Dinas while the remainder is deposited on dumping grounds throughout the district.

No representations were made in the course of the year under Part I. or Part II. of the Housing Act of 1890 as regards unhealthy areas and no complaints concerning such areas were received.

There are no registered houses let in lodgings throughout the area. In a district such as the Rhondda the

application of the bye-laws relating to tents, vans, and sheds is seldom required except on the occasions when the locality is visited by travelling shows.

VII.—APPENDICES. STATISTICS FOR 1919.

1. Number of dwelling-houses in respect of which complaints were made that they are unfit for human habitation... Nil.

2. Action under Section 17 of the Housing Act, 1909:—
 - (a) Number of dwelling-houses inspected under and for the purpose of the Section 1397

 - (b) Number of dwelling-houses which were considered to be unfit for human habitation... 22

 - (c) Number of dwelling-houses the defects in which were remedied without the making of closing orders ... 45

3. Action under Section 28 of the Housing Act, 1919:—
 - (a) Number of Orders for repairs issued ... 856

 - (b) Number of cases in which repairs were carried out by the local authority ... Nil.

 - (c) Number of houses voluntarily closed on notice by owner that they could not be made fit without reconstruction... Nil.

4. Closing Orders:—

(a) Number of representations made to the local authority with a view to the making of Closing Orders	22
(b) Number of Closing Orders made	22
(c) Number of dwelling-houses in regard to which Closing Orders were determined on the houses being made fit for human habitation	9

5. Demolition Orders:—

(a) Number of Demolition Orders made ...	0
(b) Number of houses demolished in pursuance of Demolition Orders... ..	1

6. Number of houses demolished voluntarily ... 6

7. Obstructive Buildings:—

(a) Number of representations made (Section 38 of the Housing Act, 1890)... ..	Nil.
(b) Number of buildings demolished	Nil.
(c) Number of representations still under consideration	Nil.

VIII.—STAFF ENGAGED IN HOUSING WORK.

When not occupied in the performance of public health work, such as the abatement of nuisances, attention to complaints and the relief of the district inspectors, the time of four housing inspectors is devoted to duties under

the Housing Acts and the Housing Regulations, their duties consisting of the service of inspection notices, the detailed inspections of the houses in the localities allotted to them, the preparation of schedules of the defects found, communications for the district inspectors of the existence of nuisances needing early abatement, despatch to the office of the cards upon which records of inspections are entered, of copies of the notices to be served and of weekly reports upon the work done.

The duties of the six district inspectors in connexion with housing include the service of the statutory notices, correspondence with and interviewing owners, agents and contractors, supervision of the work during its execution, the preparation of weekly reports upon the work carried out and the maintenance of a proper *liaison* with the Surveyor's repairing staff.

A considerable portion of the time of two clerks is spent in the compilation of records from the inspection cards, the preparation of statutory notices, closing orders, material for the Surveyor's repairing staff and periodical reports and the registration of correspondence. The work in detail is directed and controlled by the Chief Inspector (J. Towy Thomas) subject to the general supervision of the Medical Officer of Health.

The staff of men employed by the Surveyor in carrying out repairs under Section 28 of the Housing Act of 1919 consisted at the end of the year of 1 supervisor, 5 stonemasons, 2 carpenters and 2 labourers.

RATS AND MICE (DESTRUCTION) ACT, 1919.

In the course of the year 1919 systematic inquiries were made throughout the district as to the exceptional prevalence of rats within the area or any particular

portion of it and it was ascertained that, on the whole, there had been a decrease rather than an increase during recent years. There are parts of the district however, especially in connection with the surface workings of some of the collieries, where the number of rats seen or believed to exist may be said to be exceptional at times, but the measures taken have usually served to keep them within reasonable check. There has however been no general and organized effort made to secure a wholesale destruction of rats throughout the district.

The duty of administering the Rats and Mice (Destruction) Act, 1919, in the Rhondda devolves upon the Glamorgan County Council who however have authority to delegate their powers under the Act to district councils within their county, but no such delegation had definitely taken place in 1919. An optional delegation under a former act previously offered by the County Council was declined by the Rhondda Council.

RAG FLOCK ACT. 1911.

In view of the wider application of the term "flock manufactured from rags" consequent upon decisions in the High Courts, further inquiries as to the extent to which this commodity is used or sold in the district were carried out, and arrangements were made for the examination of samples at the Cardiff and County Public Health Laboratory.

This material as such is however but little used in the district and on no occasion in the course of the year were the circumstances such as to suggest the advisability of taking samples for the purpose of analysis,

SHOPS ACTS, 1912 AND 1913.

Number of Shops in district in 1918	...	...	2,373
New Shops established in 1919	...	...	375
Shops removed from Register in 1919	...	...	211
Net Increase of Shops in 1919	...	...	164
Number of Shops in district in 1919	...	...	2,537
Number of Shops subject to Local Closing Orders	...	...	1,182
Number of Shops in which Assistants are employed	...	...	993
Number of Shops exempted from Weekly Half-Holiday Order	...	...	1,291
Number of Shops in which Assistants are employed that are exempted from Weekly Half-Holiday Order	...	...	355
Number of Assistants in exempted Shops	...	...	618
Number of Shops reported as requiring a licence under the Retail Business Order	...	...	206
Legal Proceedings taken under Shops Acts during 1919	...	...	35

As may be seen by reference to the section "Police Court Proceedings," 35 prosecutions were instituted in the course of the year for offences against the provisions of the Shops Acts or the Closing Orders made thereunder. The sale of provisions and failure to close premises after prohibited hours and the non-exhibition of statutory notices were the principal transgressions.

Contrary to our experience of the previous year, there was an increase of 164 in the total number of shops established as compared with a decrease of 146 in 1918, the new shops being fairly well distributed among the various trades.

Report of the Shops Inspectors for the Year 1919,

TRADE.	Total Number of Shops.	Number of Shops in which Assistants are employed.	Number of Assistants employed.				WEEKLY HALF-HOLIDAY.							Number subject to Local Closing Order.	Legal Action Taken.				
			Males.		Females.		Shops.			Assistants.									
			Under 18	Over 18	Under 18	Over 18	Monday	Thursday	Saturday	Exempt.	Monday	Tuesday	Wednesday			Thursday	Friday	Saturday	
Bazaars and Fancy Dealers ..	18	8	—	—	17	8	—	—	—	—	—	—	—	—	—	—	—	109	1
Boot and Shoe Dealers ..	109	54	31	44	13	44	109	18	—	—	—	—	—	—	—	—	—	162	5
Butchers and Meat Purveyors ..	162	73	27	80	10	19	162	—	—	—	—	—	—	—	—	—	—	—	—
Chemists, Herbalists and Drug Stores ..	35	23	16	24	9	12	—	—	—	—	—	—	—	—	—	—	—	—	—
Confectioners and Bread Dealers ..	159	69	1	1	21	88	—	—	—	—	—	—	—	—	—	—	—	—	—
Dairy Products and Milk Shops ..	26	6	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Drapers, Hosiery and Milliners ..	924	121	14	49	188	266	224	—	—	—	—	—	—	—	—	—	—	224	1
Fried Fish and Chip Potato Shops ..	128	46	2	4	21	49	—	—	—	—	—	—	—	—	—	—	—	—	—
Furniture, Musical Instruments, and Sewing Machine Dealers ..	48	26	3	31	2	24	—	—	—	—	—	—	—	—	—	—	—	48	3
Greengrocers, Fruiterers, and Florists ..	249	61	8	2	21	79	48	—	—	—	—	—	—	—	—	—	—	287	3
Grocers and Provision Dealers ..	287	200	142	390	60	250	287	—	—	—	—	—	—	—	—	—	—	109	7
Hairdressers ..	109	45	29	24	10	2	109	—	—	—	—	—	—	—	—	—	—	—	—
Hardware, Chinaware, Tinware, Paper, Paint and Oil Vendors ..	50	12	—	—	8	7	50	—	—	—	—	—	—	—	—	—	—	50	1
Ironmongers, Plumbers, Gas, Water and Sanitary Fittings Dealers ..	49	23	11	17	4	13	—	—	—	—	—	—	—	—	—	—	—	49	—
Newsagents, Tobacconists, Stationers & Booksellers ..	89	20	—	—	8	17	47	2	—	—	—	—	—	—	—	—	—	—	—
Photographers and Picture Framers ..	8	3	—	1	2	2	7	1	—	—	—	—	—	—	—	—	—	—	—
Refreshment Houses and Temperance Bars ..	69	32	1	20	9	19	—	—	—	—	—	—	—	—	—	—	—	—	—
Restaurants, Cooked Meat Shops, Coffee Rooms, and Oyster Bars ..	22	5	1	—	5	6	—	—	—	—	—	—	—	—	—	—	—	—	—
Retailers of Intoxicating Liquors ..	130	83	—	16	6	137	—	—	—	—	—	—	—	—	—	—	—	—	—
Sweet Shops ..	374	10	1	3	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—
Tailors, Clothiers, and Outfitters ..	100	45	27	50	7	13	100	—	—	—	—	—	—	—	—	—	—	100	4
Watchmakers and Jewellers ..	37	13	2	4	4	8	37	—	—	—	—	—	—	—	—	—	—	37	1
Miscellaneous ..	55	15	7	8	3	6	44	1	—	—	—	—	—	—	—	—	—	7	2
Totals ..	2537	993	319	768	431	1081	162	1080	4	1291	157	100	166	2161	11	4	—	1182	35

There was a corresponding increase in the number of assistants employed, the males from 887 to 1,087 and the females from 1,494 to 1,512, or net increases of 200 and 18 respectively.

The Closing Order made under Regulation 10B of the Defence of the Realm (Consolidation) Regulations, 1914, continued to be enforced by the Police Authorities throughout the year.

In the course of the year Inspector Thomas Osborne resumed as Shops Inspector after years spent in the army in which he had attained the rank of sergeant on demobilisation. Inspector Richard Thwaites had in the meantime exercised supervision over the whole area as far as the circumstances rendered practicable.

EMPLOYMENT OF CHILDREN ACT, 1903.

The considerable increase in the number of children engaged in shops throughout the district, which marked the war period, was to a great extent maintained during 1919. It was found necessary to institute legal proceedings in 11 instances of offences against the Act's provisions.

Although the bye-laws framed under the Act for regulating street trading are administered by the Police Authorities, incidental assistance is not infrequently given by the Council's Shops Inspectors.

FACTORY AND WORKSHOP ACT.

The number of factories and workshops distributed throughout the district amounts to 1,167, the total of the former being 47 and the latter 1,120, or 55

more than in the previous year. During the year 558 visits were made by the district inspectors to these premises, As a result notices were served in respect of 22 defects under the Public Health Clauses of the Factory and Workshop Act, but due compliance therewith had not been obtained before the end of the year in more than 15 instances. As will be seen from the appended table the trades carried on are such as are incidental to any large community and though numerous the workshops are small.

There was a reduction from 156 to 148 in the case of the bakehouses during the year. Generally they are small, give employment to few persons, and none of them falls within the definition of underground bakehouses given in the Act.

There are practically no outworkers engaged throughout the urban area.

All plans of new workshops come as a matter of routine before the departments of the Surveyor and Medical Officer of Health before being submitted to the appropriate Committee for consideration and the Council's bye-laws as well as the sanitary provisions of the Factory and Workshop Act, 1901, are methodically applied.

The following tables set out the number and classification of the workshops in the district and the work done under the provisions of the Act.

Workshops and Workplaces in the Rhondda in Wards

	1	2	3	4	5	6	7	8	9	10	Total
Bakers ...	12	24	17	13	15	9	11	15	14	18	148
Barbers ...	10	12	12	10	13	13	10	12	14	10	116
Blacksmiths ...	2	1	4	1	2	2	2	1	3	1	19
Bootmakers ...	10	13	21	20	16	20	11	14	23	12	160
Bottling Stores ...	—	—	—	—	—	1	—	—	—	1	2
Carpenters ...	6	10	10	5	4	6	3	7	9	10	70
Coachmakers ...	1	—	1	—	—	1	—	1	2	—	6
Cycle Repairers ...	—	2	1	1	1	1	—	2	2	1	11
Dressmakers ...	15	18	16	18	18	8	5	16	21	15	150
Dressmakers and Milliners (Comb.)	1	2	3	1	—	1	6	3	1	2	20
Fried Fish Shops .	10	11	11	14	13	15	11	13	15	11	124
Glaziers ...	1	2	2	2	—	2	—	1	—	1	11
Jewellers ...	1	2	3	2	2	7	1	6	3	4	31
Laundries ...	—	1	1	—	—	1	—	—	—	1	4
Milliners ...	7	8	12	6	7	5	5	9	10	12	81
Monumental Masons...	—	4	—	—	—	2	—	—	2	1	9
Picture Framers ...	1	2	3	1	—	1	1	—	2	1	12
Plumbers ...	1	2	3	2	2	1	1	3	1	2	18
Printers ...	1	1	1	—	—	—	—	2	—	1	6
Quarries ...	5	4	4	8	4	4	4	3	8	3	47
Saddlers ...	1	—	—	—	—	1	1	2	—	1	6
Sweet Makers ...	1	—	2	1	—	—	—	—	—	—	4
Tailors ...	4	8	14	5	3	7	3	4	4	6	58
Tinmen ...	—	—	1	1	1	1	—	1	2	—	7
Totals ...	90	127	142	111	101	109	75	115	136	114	1120

Inspection of Factories and Workshops.

PREMISES. (1)	Number of		
	Inspec- tions. (2)	Written Notices. (3)	Prosecu- tions. (4)
Factories— (Including Factory Laundries).	45	—	—
Workshops. (Including Workshop Laundries).	513	15	—

Defects found in Factories and Workshops.

PARTICULARS.	Number of Defects.			No. of Prosecutions.
	Found.	Remedied	Referred to H.M. Inspector.	
(1)	(2)	(3)	(4)	(5)
NUISANCES UNDER THE PUBLIC HEALTH ACTS—				
Want of Cleanliness.	13	13	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors	—	—	—	—
Other Nuisances	1	1	—	—
Sanitary Accommodation. {	Insufficient	—	—	—
	Unsuitable or defective ..	3	—	—
	Not separate for sexes	5	1	—
OFFENCES UNDER THE FACTORY AND WORKSHOP ACT—				
Illegal occupation of Underground Bakehouse (s.101)	—	—	—	—
Breach of special sanitary requirements for Bakehouses (ss.97 to 100)	—	—	—	—
OTHER OFFENCES—				
(Excluding offences relating to outwork)	—	—	—	—
Total	22	15	—	—

Factories and Workshops. Other Matters.

CLASS.		Number
(1)		(2)
<hr/>		
Matters notified by H.M. Inspector of Factories :		
Failure to affix Abstract of the Factory and Workshop Act (S. 133)	... ..	—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S.5.)	{ Defects notified by H.M. Inspector Reports (of action taken) sent to Inspector	19 —
Other	... ..	—
Underground Bakehouses (S. 101) :		
Certificates granted during the year	... ..	—
In use at the end of the year	... ..	—

APPENDIX.

Table 1.

Population of the Rhondda Valley since 1801.

Year.	Houses.			Persons.			Persons per House.
	In-habited.	Unin-habited.	Build-ing.	Males	Females.	Total.	
a1801				265	277	542	
1811				283	293	576	
1821				309	338	647	
1831				277	265	542	
1841				386	362	748	
1851				493	458	951	
1861	561	107	5	1,669	1,366	3,035	5·4
1871	2,710	32	62	9,559	7,355	16,914	6·2
b1871						23,950	
1881	9,193	340	158	30,877	24,755	55,632	6·0
1891	13,551	146	374	50,174	38,177	88,351	6·5
1901	19,210	368	112	62,315	51,420	113,735	5·92
1911	26,250	457	444	83,209	69,572	152,781	5·82
1919						185,329	

NOTES.

(a) The census returns for 1801 include Rhigos, which is not within the present area of the Rhondda District.

(b) Portions of the Llanwonno and Llantrisant Districts were added to the Rhondda District on October 1st, 1879.

The Registrar-General estimated the population in the enlarged area in 1871 at 23,950.

Table 7.

Number of Births, Birth-rate, number of Deaths of Children under one year of age, Infantile Mortality-rate, number of Deaths, and Death-rate in each year since 1891.

YEAR.	Total Number of Births	General Birth-rate per 1,000.	Number of Deaths of children under one year of age.	Infantile Mortality- rate per 1,000 births.	Total Number of Deaths.	General Death- rate per 1,000.
1891	3,935	44.3	862	219	2,255	25.4
1892	3,916	42.9	757	193	1,804	19.8
1893	4,149	44.3	932	225	2,132	22.8
1894	3,715	38.7	757	204	1,706	17.7
1895	4,245	43.1	997	235	2,246	22.8
1896	4,328	42.9	855	193	2,105	20.8
1897	4,109	39.7	838	204	2,049	20.1
1898	4,120	38.8	793	192	1,979	18.8
1899	4,089	37.5	1,016	248	2,419	22.4
1900	4,469	40.0	839	188	2,181	19.9
1901	4,586	40.0	1,020	222	2,431	21.2
1902	4,937	41.8	883	179	2,190	18.6
1903	4,897	40.3	778	159	1,998	16.4
1904	4,860	38.8	925	190	2,345	18.7
1905	4,664	36.2	927	199	2,402	18.6
1906	4,751	35.8	821	173	2,074	15.6
1907	4,831	35.3	782	162	2,133	15.6
1908	5,454	38.7	1,002	184	2,516	17.9
1909	5,577	38.4	724	130	2,231	15.4
1910	5,628	37.7	770	137	2,181	14.6
1911	5,491	35.7	902	164	2,352	15.3
1912	5,236	33.1	666	127	2,182	13.8
1913	5,505	34.0	766	139	2,360	14.6
1914	5,558	34.2	762	137	2,410	14.8
1915	4,983	30.0	567	114	2,218	14.2
1916	4,481	26.8	471	105	1,940	12.6
1917	4,145	24.1	425	103	1,977	12.8
1918	4,346	26.3	448	103	2,340	15.9
1919	4,263	23.0	474	111	2,111	11.9

Table 8.

Showing the Number of Houses, Estimated Population, Number of Deaths, and Death-rate per 1,000 for each Ward.

Wards.	Number of occupied houses.	Estimated (civil) population to middle of 1919.	Number of deaths from all causes.	Death-rate per 1,000.
1 ...	2,522	.. 16,255	... 195	... 12.0
2 ...	2,957	... 18,886	.. 238	... 12.6
3 ...	2,161	... 13,182	.. 140	... 10.6
4 ...	2,193	... 13,661	... 147	... 10.8
5 ...	2,738	... 17,349	... 169	... 9.8
6 ...	2,586	... 16,618	... 191	... 11.5
7 ...	2,457	... 13,888	... 231	... 16.6
8 ...	3,433	... 19,104	... 202	... 10.6
9 ...	4,054	... 26,908	... 309	... 11.5
10 ...	3,312	... 22,060	... 289	... 13.1
Rhondda...	28,413	... 177,911	... 2,111	... 11.9

Table 12.

Showing the number of Deaths in the Rhondda from the principal Zymotic Diseases since 1899.

Year.	Small-Pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Fevers.			Diarrhoea.	Total Zymotic Deaths.	Zymotic Death-rate.	Average Zymotic Death-rate of Ten Years.
						Typhus.	Enteric.	Simple Continued				
1899	-	—	10	70	186	-	55	—	169	489	4.4	3.4
1900	-	121	35	58	125	-	24	—	118	481	4.3	
1901	-	3	43	33	135	-	53	—	327	595	5.2	
1902	1	109	27	40	81	-	21	—	109	389	3.3	
1903	-	8	38	52	42	-	44	—	109	293	2.4	
1904	-	102	20	53	32	-	42	—	211	460	3.7	
1905	-	84	11	55	16	-	15	1	172	354	2.7	
1906	-	24	9	27	25	-	20	—	206	311	2.4	
1907	-	68	9	26	20	-	22	—	147	292	2.1	
1908	-	102	7	54	32	-	21	—	319	535	3.8	
1909	-	47	15	27	35	-	4	—	130	258	1.8	1.7
1910	-	25	24	41	15	-	12	—	115	232	1.6	
1911	-	144	19	18	21	-	18	—	313	533	3.5	
1912	-	127	19	80	19	-	16	—	39	300	1.9	
1913	-	57	22	15	53	-	12	1	174	334	2.1	
1914	-	84	10	44	36	-	5	—	103	282	1.7	
1915	-	58	12	47	29	-	9	—	58	213	1.4	
1916	-	41	8	14	17	-	5	—	55	140	.9	
1917	-	52	5	26	23	1	6	—	16	129	.8	
1918	-	89	5	37	11	-	5	—	27	174	1.2	
1919	-	25	4	38	19	-	5	—	26	117	.7	

Table 13.—Comparing the Death-rates from Zymotic Diseases during the years 1899-1919, in the Rhondda with those of similar Diseases in England and Wales (per 1,000 living).

Year.	Small-pox.		Measles.		Scarlet Fever.		Whooping Cough.		Diphtheria		FEVERS.				Diarrhoea.		Total Zymotic Deaths		Zymotic Death-rate	
	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Typhus.	Enteric	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.
1899	—	·10	·09	·12	·64	·30	·170	·29	·170	·29	—	·50	—	—	·155	·98	489	4·4	22	20
1900	—	·01	·31	·12	·51	·34	·112	·29	·112	·29	—	·21	—	—	·105	·69	481	4·3	20	20
1901	—	·01	·37	·13	·28	·30	·118	·27	·118	·27	—	·46	—	—	2·85	·91	597	5·2	38	164
1902	·008	·03	·23	·15	·34	·29	·68	·23	·68	·23	—	·18	—	—	·92	·38	389	3·3	146	91
1903	—	·02	·31	·12	·42	·34	·34	·18	·34	·18	—	·35	—	—	·90	·50	293	2·4	194	—
1904	—	·01	·16	·11	·42	·34	·26	·17	·26	·17	—	·09	—	—	·168	·86	460	3·7	152	—
1905	—	—	·32	·09	·43	·25	·13	·16	·13	·16	—	·12	·008	—	·134	·59	354	2·7	173	—
1906	—	—	·07	·10	·20	·23	·18	·17	·18	·17	—	·15	—	—	·155	·87	311	2·4	173	—
1907	—	—	·07	·09	·19	·29	·14	·16	·14	·16	—	·16	—	—	·108	·29	292	2·1	126	—
1908	—	—	·05	·08	·39	·27	·23	·15	·23	·15	—	·15	—	—	2·27	·50	585	3·8	129	—
1909	—	—	·10	·09	·19	·20	·24	·14	·24	·14	—	·03	—	—	·85	·28	258	1·8	112	—
1910	—	—	·16	·06	·27	·24	·10	·12	·10	·12	—	·08	—	—	·77	·29	232	1·6	99	—
1911	—	—	·12	·05	·12	·21	·14	·13	·14	·13	—	·12	—	—	2·03	1·06	533	3·5	188	—
1912	—	—	·12	·05	·51	·23	·12	·11	·12	·11	—	·10	—	—	·25	—	300	1·9	—	—
1913	—	—	·14	·06	·09	·14	·33	·12	·33	·12	—	·08	—	—	1·07	—	334	2·1	—	—
1914	—	—	·06	·08	·27	·21	·20	·15	·20	·15	—	·03	—	—	·62	—	282	1·7	—	—
1915	—	—	·08	·06	·30	·21	·19	·15	·19	·15	—	·06	—	—	·37	—	213	1·4	—	—
1916	—	—	·05	·04	·09	·16	·11	·14	·11	·14	—	·03	—	—	·36	—	140	0·9	—	—
1917	—	—	·03	·02	·17	·13	·15	·13	·15	·13	·01	·04	—	—	·10	—	129	0·8	—	—
1918	—	—	·03	·03	·25	·29	·07	·14	·07	·14	—	·03	—	—	·18	—	174	1·2	—	—
1919	—	—	·02	·03	·21	·07	·11	·13	·11	·13	—	·03	—	—	·15	—	117	·7	—	—

Table 18.

Showing the number of cases, and incidence of the Notifiable Diseases in the Rhondda since compulsory notification was adopted in 1894.

Year.	Cases Notified.	Estimated Population.	Incidence per 1,000 of Population.
1894	625	95,904	6.6
1895	933	98,356	9.5
1896	1,241	100,870	12.3
1897	1,031	103,445	9.9
1898	1,652	106,094	15.6
1899	2,700	108,807	24.8
1900	3,214	111,587	28.8
1901	3,039	114,587	26.5
1902	1,879	118,020	15.9
1903	1,597	121,557	13.1
1904	1,240	125,199	9.9
1905	534	128,951	4.1
1906	779	132,814	5.9
1907	773	136,794	5.7
1908	862	140,894	6.1
1909	1,091	145,116	7.5
1910	1,530	149,464	10.2
1911	1,261	153,775	8.2
1912	1,652	157,951	10.5
1913	1,820	162,137	11.2
1914	1,646	162,592	10.1
1915	1,274	156,260	8.2
1916	3,572	153,373	23.3
1917	3,376	154,388	21.9
1918	4,015	147,296	27.2
1919	2,254	177,911	12.7

Scarlet Fever, Typhoid Fever, Diphtheria, Erysipelas, and Puerperal Fever, became notifiable on 1st January, 1894.

Pulmonary Tuberculosis, became notifiable on 1st January, 1912.

All other forms of Tuberculosis became notifiable on 1st February, 1913.

Cerebro-spinal Fever and Acute Poliomyelitis became notifiable on 1st September, 1912.

Ophthalmia Neonatorum became notifiable on 1st April, 1914.

Measles and German Measles became notifiable on 1st January, 1916.

Acute Encephalitis Lethargica and Acute Polio Encephalitis became notifiable on 1st January, 1919.

Acute Primary Pneumonia, Acute Influenzal Pneumonia, Malaria, Dysentery, and Trench Fever became notifiable on 1st March, 1919.

Table 49.

Summary of District Inspectors' Work, 1919.

DISTRICT.	1	2	3	4	5	6	Total
Accumulation of Refuse	28	7	15	—	5	12	67
" " Manure ..	—	—	5	—	7	4	16
Blocked Drain ..	197	180	154	95	254	70	950
Blocked W.C.	39	44	65	27	45	37	257
Defective Drain ..	16	29	27	38	58	13	181
Lip Trap to Gully Trap	1	9	8	—	13	—	31
Unventilated Drain ...	—	—	—	—	—	—	—
Defective Ventilating Pipe	3	4	2	3	—	—	12
Waste Pipe Direct ...	—	—	—	—	—	—	—
No Water in W.C.	2	1	9	2	38	18	70
Dilapidated or Filthy W.C.	24	64	33	6	9	29	165
No W.C.	—	—	—	2	—	—	2
Dilapidated Back Area	6	23	15	—	—	25	69
Defective or no Rain- water Shoots	30	50	29	41	172	50	372
Dirty Houses ..	6	5	2	—	7	2	22
Overcrowding ..	9	1	—	2	5	5	22
Animals as a Nuisance	13	1	1	—	5	4	24
Damp and Dilapidated Houses	12	73	18	73	155	36	367
Insufficient Water Supply	18	12	—	—	20	—	50
Other Nuisances ...	64	69	10	18	13	—	174

Table 50.

Summary of District Inspectors' work during 1919, as reported to M.O.H. each week.

DISTRICT.	Total.	1	2	3	4	5	6
Cases of Infectious Disease investigated	717	216	90	84	104	132	91
Revisits to:—							
Infected Houses	2199	713	276	94	175	592	349
Unabated Nuisances and Unremedied Defects	16877	2724	1548	2846	3725	3254	2780
Slaughter Houses	1017	332	162	89	148	168	118
Lodging Houses	354	—	219	—	135	—	—
Bakehouses	628	47	128	136	110	80	127
Dairies	290	58	80	23	42	41	46
Factories and Workshops	558	31	128	22	80	142	155
Disinfections	701	214	90	78	119	128	72
New Buildings (drains of)	244	10	50	50	10	112	12
Special Complaints received	480	73	139	134	85	7	42
Letters written to abate Nuisances :—							
By Inspector	2032	304	307	316	331	477	297
Referred to M.O.H.	784	174	126	102	118	179	85
Referred to Council	1170	211	149	102	206	404	98
New Buildings certified	1	—	—	—	1	—	—
Drain connections :—							
No. of Connections made	5	—	1	—	1	3	—
No. of Houses connected	10	—	1	—	1	8	—
No. of Houses connected to date ..	28039	5499	4371	4579	4234	5088	4268
No. of Houses unconnected to date ..	283	21	12	58	63	59	70
Scavenging—Fines inflicted :—							
Without Brush	—	—	—	—	—	—	—
Without Bell	—	—	—	—	—	—	—
Without Cover to Cart ..	—	—	—	—	—	—	—
Improper use of Cover	—	—	—	—	—	—	—
Improper use of Cart	—	—	—	—	—	—	—
Failing to send out Cart	157/6	125/-	27/6	—	5/-	—	—
Neglecting Back Lanes... ..	90/-	5/-	—	—	—	—	85/-
Neglecting to use Brush	—	—	—	—	—	—	—
Neglecting to Clear Ashbin	—	—	—	—	—	—	—
Scavenging after 1 p.m.	—	—	—	—	—	—	—
Depositing on unauthorized ground ..	65/-	25/-	30/-	—	10/-	—	—

Table 52.

Premises requiring Periodical Inspection.

District.	1	2	3	4	5	6	Whole District.
Bakehouses ...	36	30	22	18	21	21	148
Cowsheds ...	12	16	4	9	5	6	52
Dairies and Milkshops ...	29	35	30	22	25	23	164
Lodging Houses ...	—	7	—	3	—	—	10
Slaughter Houses ...	7	6	8	3	2	2	28
Offensive Trades ...	—	1	1	1	—	—	3

Rhondda Urban District.

Table I.

Vital Statistics of Whole District during 1919 and previous years.

Year.	Population estimated to Middle of each year.	BIRTHS.			Total Deaths registered in the District		Transferable Deaths.		Net Deaths belonging to the District.			
		Uncorrected Number.	Net.		Number.	Rate.	Of Non-Residents registered in the District.	Of Residents not registered in the District.	Under 1 year of age.		At all ages.	
			Number	Rate.					Number	Rate per 1,000 net births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1914	162,592	5,541	5,558	34.2	2,336	14.4	39	113	762	137	2,410	14.8
1915	156,260	4,960	4,983	*30.0	2,148	13.7	43	113	567	114	2,218	14.2
1916	153,373	4,481	...	*26.8	1,845	12.0	†35	130	471	105	1,940	12.6
1917	154,388	4,145	...	*24.1	1,851	12.0	†25	151	425	103	1,977	12.8
1918	147,296	4,346	...	*26.3	2,224	15.1	†39	155	448	103	2,340	15.9
1919	177,911	4,263	...	*23.0	2,024	11.4	†25	112	474	111	2,111	11.9

NOTES :—This table is arranged to show the gross births and deaths in the district and the births and deaths properly belonging to it with the corresponding rates. The corrected number of births is not available for the years 1916, 1917, 1918 and 1919.

Rates in Columns 5, 7, and 13 are calculated per 1,000 of estimated population.

*The birth-rate (Column 5) is in accordance with the advice of the Registrar-General, calculated upon a population

in 1915 of 166,365
in 1916 of 166,873
in 1917 of 172,099
in 1918 of 165,041
in 1919 of 185,329

The deaths included in Column 6 are the whole of those registered during the year as having actually occurred within the district. The deaths included in Column 12 are the number in Column 6, corrected by the subtraction of the number in Column 8 and the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by the subtraction of deaths under one included in the number given in Column 8 and by the addition of the deaths under one included in the number given in Column 9.

† The numbers in Column 8 marked thus (†) include soldiers who died in the district, viz :—

2 in 1916
3 in 1917
8 in 1918
5 in 1919

“Transferable Deaths” are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided.

Area of District in acres
(exclusive of area covered by water). } 23,885.

Table II. RHONDDA URBAN DISTRICT.

Cases of Infectious Disease notified during the Year 1919.

[illegible]

111

The localities (Wards) adopted for this Table are the same as in Table III.

Isolation Hospitals (provided by the Urban District Council):—

- | | Number of Diseases that can be concurrently treated 5 |
|--|---|
| 1. Tyntyla Isolation Hospital (Ward 4) | Total available beds, 110. |
| 2. Penrhys Isolation Hospital (Ward 9) | |

- Total available beds, 110.

Table III.—continued.

1		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
18.	Other Diseases of the Respiratory Organs	21	...	2	1	1	1	3	6	7	5	3	...	3	1	...	1	3	3	2	5
19.	Diarrhea and Enteritis (under 2 years)	51	44	7	...	...	...	...	...	...	9	16	...	4	...	2	...	4	5	6	...
20.	Appendicitis and Typhlitis ...	11	...	...	...	5	3	...	1	...	...	...	2	...	2	...	...	3	2	2	5
21.	Cirrhosis of Liver ...	4	...	...	...	...	...	2	2	...	1	...	...	1	...	...	...	...	...	...	...
21a.	Alcoholism ...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
22.	Nephritis and Bright's Disease	51	...	1	3	3	4	14	16	10	7	6	5	...	6	4	3	5	11	4	1
23.	Puerperal Fever ...	5	...	...	...	...	...	5	...	...	2	...	...	...	1	...	...	1	1	...	...
24.	Other Accidents and Diseases of Pregnancy and Parturition ...	26	...	...	...	...	6	20	...	...	2	2	3	2	1	4	2	3	5	2	3
25.	Congenital Debility and Malformation, including Premature Birth	195	190	5	...	...	...	...	...	...	21	23	11	10	16	15	20	16	39	24	1
26	Violent Deaths, excluding Suicide	98	5	1	11	9	16	28	21	7	10	14	3	6	12	9	12	7	13	12	9
27.	Suicide ...	3	...	...	...	...	...	1	2	...	...	...	1	...	...	1	...	1	...	...	...
28.	Other Defined Diseases	506	94	14	15	18	11	44	112	198	40	49	44	38	50	45	46	56	61	77	35
29.	Diseases ill-defined or unknown	5	...	1	...	1	2	...	1	...	...	...	...	1	2	...	1	1	...	...	...
Rhonda		2111	474	105	106	95	128	340	436	427	195	238	140	147	169	191	231	202	309	289	121
Sub-entries included in above figures.																					
11 (a)	Tabes Mesenterica	1	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...
(b)	General Tuberculosis	3	...	...	...	...	...	2	...	...	...	...	...	1	...	...	...	...	2	...	...
14	Cerebro-spinal Fever	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...
17 (a)	Lobar Pneumonia	22	...	...	1	2	1	7	11	...	...	1	1	2	...	3	4	4	3	4	...
(b)	Lobular Pneumonia	120	53	27	17	9	2	6	4	2	12	16	10	8	3	7	19	7	19	19	...
18.	Fibroid Phthisis	1	...	...	...	...	...	...	...	1	...	...	...	...	...	2	...	...	...	1	...
19 (a)	Diarrhea (under 2 years)...	21	19	2	...	...	...	...	...	...	5	1	2	3	...	...	...	4	4	...	...
(b)	Enteritis (under 2 years) ...	30	25	5	...	...	...	...	...	...	4	15	2	2	...	1	...	...	1	6	...
25 (a)	Congenital Malformations	18	16	2	...	...	...	...	...	...	1	4	1	1	8	10	8	...	3	...	...
(b)	Premature Birth	98	98	...	...	...	...	...	...	...	13	11	4	5	8	10	4	7	21	11	...
(c)	Atrophy, Debility, and Marasmus	79	76	3	...	...	...	...	...	...	7	8	6	4	8	4	8	6	15	13	1

Table III.—continued.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
26 (a) Burns (including Scalds) ..	15	..	3	8	2	1	2	1	1	3	3	..	..	3	..	..	1	3	2	..
(b) Accidental Suffocation ..	5	1	1	..	..	..	..	1	..	..	1	..	..	..	..	3	..	1	..	1
28 German Measles ..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Veneral Diseases ..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Septic Diseases ..	9	1	..	..	1	1	6	..	1	..	1	1	..	2	1	..	1	1	2	..
Diabetes ..	6	..	..	..	..	..	1	3	2	1	1	1	2	2	..	..	3	1	1	..
Pernicious Anæmia ..	10	..	..	..	..	..	2	6	2	1	1	..	2	1	2	2	..	1	1	..
Rheumatoid Arthritis ..	5	..	..	..	..	..	1	4	..	..	..	..	..	..	..	..	..	..	..	..
Jaundice ..	1	..	..	..	..	..	..	..	1	..	2	..	..	..	..	1	..	..	1	..
General Paralysis of the Insane ..	3	..	..	..	..	..	2	1	..	..	..	..	..	..	..	1	1	..	..	..
Epilepsy ..	8	1	..	..	1	1	4	..	1	..	1	1	2	1	1	1	1	1	1	..
Convulsions ..	62	53	6	3	..	..	..	..	..	2	2	3	2	5	8	9	11	13	7	..
Cerebral Hæmorrhage ..	80	..	..	..	..	..	5	33	42	6	11	4	4	8	9	7	13	8	10	5
Cerebral Tumour ..	7	..	..	..	..	..	1	1	..	..	..	1	..	1	..	..	1	4	1	..
Locomotor Ataxy ..	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Infantile Paralysis ..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
Other Diseases of the Nervous System ..	11	1	..	1	1	1	2	7	..	1	..	1	..	1	2	1	2	1	3	2
Otitis Media ..	8	1	..	2	2	1	1	1	..	2	..	..	..	..	..	1	4	1	1	1
Aneurysm ..	5	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..
Arterial Sclerosis ..	9	..	..	..	..	..	2	1	..	2	..	1	..	1	..	1	1	2	3	1
Embolism and Thrombosis ..	13	..	..	..	..	..	..	2	7	2	1	1	2	1	..	1	1	..	..	..
Stomatitis ..	2	2	..	..	..	..	..	6	7	1	1	1	..	1	..	1	1	..	..	..
Gastric Ulcer ..	4	..	..	..	..	..	4	..	..	1	1	..	1	1	..	..	..	1	1	2
Intestinal Obstruction ..	15	2	1	..	..	..	2	3	7	1	1	..	1	1	1	..	1	2	3	..
Strangulated Hernia ..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..
Gallstone ..	3	..	..	..	..	..	..	..	1	1	..	1	..	..	..	..	..	..	1	1
Acute Peritonitis ..	2	..	..	1	1	1	..	..	3	1	..	..	..	..	1	..	..	..	1	..
Atelectasis ..	7	7	..	..	..	..	..	..	..	..	..	..	2	..	..	..	1	1	3	..

Table III.—continued.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Injury at Birth ...	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..
Diarrhœa (over 2 years) ...	5	..	..	1	..	..	..	1	2	3	4	2	1	..	..	1	..	1	2	..
Enteritis (over 2 years) ...	11	..	..	1	4	..	1	2	6	6	3	5	..	..	..	1	..	..	15	..
Gastritis ...	44	24	2	2	2	1	1	1	1	10	5	14	8	9	11	2	6	3	13	1
Old Age ...	101	..	..	..	..	..	..	..	100	10	..	..	..	2	1	10	..	15	2	8
Hemiplegia ...	8	..	..	..	..	1	2	2	3	..	..	..	..	..	1	..	..	3	2	2
Angina Pectoris ...	2	..	..	..	..	..	..	2	..	..	..	..	..	..	1	..	..	..	1	..

Table M. 13 (L.G.B.)**Causes of Death in Rhordda Urban District for 1919.**

Causes of Death.			Males.	Females.
ALL CAUSES (Civilians only)	...	..	1106	969
1 Enteric Fever	..	...	4	1
2 Small-pox	...	...	—	—
3 Measles	...	...	10	13
4 Scarlet Fever	...	...	3	1
5 Whooping cough	..	...	17	21
6 Diphtheria and croup	...	...	9	10
7 Influenza	..	...	106	89
8 Erysipelas	...	...	3	2
9 Pulmonary tuberculosis	...	...	60	68
10 Tuberculous meningitis	...	...	9	7
11 Other tuberculous diseases	..	...	8	12
12 Cancer, malignant disease	...	...	42	47
13 Rheumatic fever	...	...	4	4
14 Meningitis	..	...	8	6
15 Organic heart disease	...	...	65	78
16 Bronchitis	..	...	140	109
17 Pneumonia (all forms)	...	...	102	76
18 Other respiratory diseases	..	...	18	15
19 Diarrhoea, &c. (under 2 years)	...	...	27	24
20 Appendicitis and typhlitis	..	...	7	5
21 Cirrhosis of liver	..	...	3	1
21A Alcoholism	...	...	1	—
22 Nephritis and Bright's disease	...	...	24	24
23 Puerperal fever	...	...	—	7
24 Parturition, apart from puerperal fever	..	...	—	21
25 Congenital debility, &c.	..	...	89	78
26 Violence, apart from suicide	..	...	79	16
27 Suicide	..	...	2	1
28 Other defined diseases	..	...	260	232
29 Causes ill-defined or unknown	...	..	6	1
Special Causes (included in above)—				
Cerebro-spinal fever	..	...	—	—
Poliomyelitis	...	...	—	—
Deaths of infants under 1 year of age	..	...	246	219
Deaths of Illegitimate Infants do.	...	..	14	17
TOTAL BIRTHS	..	...	2102	2080
Legitimate	...	...	2034	2010
Illegitimate	..	...	68	70
POPULATION FOR DEATH-RATE	..	...		177 911
,, FOR BIRTH-RATE	...	..		185,329

GENERAL REGISTER OFFICE,

SOMERSET HOUSE, LONDON, W.C.2.

March, 1920.

Table IV.—Rhonda Urban District. Infantile Mortality, 1919. Net Deaths from stated causes at various ages under one year of age. (continued on next page.)

[illegible]

Table IV.—continued

Pneumonia (all forms)	..	..	2	1	3	1	2	2	1	4	9	9	6	8	4	5	54
Diarrhoea	..	..	..	..	5	5	..	2	2	1	2	1	1	1	1	1	19
Enteritis	..	..	2	1	4	4	5	4	2	..	..	..	3	1	..	..	25
Gastritis	..	..	..	..	1	4	..	..	4	5	1	..	..	3	2	1	24
Syphilis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Rickets	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Suffocation (overlying)	..	1	..	..	1	..	..	..	1	..	1	..	..	..	..	..	3
Injury at Birth	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	2
Atelectasis	..	..	..	..	7	..	..	..	..	..	..	..	..	..	..	..	7
Congenital Malformations	..	..	1	1	11	1	1	1	1	..	..	..	1	..	..	..	16
Premature Birth	..	5	3	3	87	7	4	..	..	..	..	..	..	..	..	..	98
Atrophy, Debility, and Marasmus	..	32	4	2	42	6	12	1	5	1	4	2	2	1	..	..	76
Other causes	..	1	1	1	4	2	..	..	1	1	..	1	..	..	..	1	10
TOTALS	140	14	18	18	190	45	41	18	27	26	28	23	22	20	15	19	474

Net Births in the year { Legitimate 4,186.
 { Illegitimate 127.

Net Deaths in the year of { Legitimate Infants, 444.
 { Illegitimate Infants, 80.

THE ANNUAL
REPORT

OF THE

SCHOOL MEDICAL OFFICER

TO THE

Rhondda Education Authority

FOR THE YEAR 1919.

THE

REPORT

OF

THE

COMMISSION

ON THE

STATE OF THE

Rhondda Urban District Council

Members of the Rhondda Education Committee.

COUNCILLOR ABEL JACOB (Chairman).

LADY FLORENCE NICHOLAS (co-opted Member).

Mrs. ELIZA WILLIAMS (co-opted Member).

Mrs. EDITH WILLIAMS (co-opted Member).

COUNCILLOR REES MORGAN REES.

- „ GWILYM LLOYD.
- „ DAN DAVIES, J.P.
- „ WILLIAM PHILLIP THOMAS, J.P.
- „ ALFRED GLADSTONE TRIBE.
- „ JOHN MINTON.
- „ DAVID THOMAS, J.P.
- „ WALTER WILLIAMS (3 months).
- „ WILLIAM D. MORGAN (9 months).
- „ ISAAC T. REES (9 months).
- „ WILLIAM LEWIS.
- „ JAMES JAMES.
- „ WILLIAM EVANS THOMAS, M.D., J.P.
- „ THOMAS THOMAS.
- „ WILLIAM SAMUEL LANE.
- „ EVAN JOSHUA RODERICK, J.P.
- „ THOMAS OWEN.
- „ JOHN D. WILLIAMS, J.P. (3 months).
- „ OWEN JAMES BUCKLEY (9 months).
- „ THOMAS R. DAVIES.
- „ MARK HARCOMBE.
- „ GWILYM ROWLANDS (3 months).

COUNCILLOR GOMER JONES (9 months).
 „ EDGAR MORGAN.
 „ LEWIS HOPKIN.
 „ BENJAMIN DAVIES.
 „ ALFRED JOHN ORCHARD (3 months).
 „ ARTHUR J. COOK (9 months).
 „ JOHN TALWRN JONES.
 „ THOMAS GRIFFITHS, J.P.
 „ WILLIAM HENRY MATHIAS, J.P.
 „ (3 months).
 „ JOHN THOMAS, J.P. (3 months).
 „ THOMAS REES (9 months).
 „ JOHN KANE (9 months).
 „ ROWLAND HUGHES.
 „ EDWARD THOMAS WOOD.
 „ HORATIO ABRAHAM PHILLIPS.
 „ (3 months).
 „ JOHN WILLIAMS (9 months).
 „ DANIEL EVANS, J.P.
 „ HENRY EDWARD MALTBY.

Clerk to the Committee: Sir WALTER NICHOLAS.

Director of Education: T. W. BERRY.

Deputy Director of Education: R. R. WILLIAMS.

Architect: JACOB REES.

School Medical Officer: J. D. JENKINS.

Assistant School Medical Officers:

J. P. H. DAVIES.

HELENA G. JONES.

D. R. GILDER.

P. HUGHES.

Ophthalmic Surgeon: J. W. G. MYLER.

Medical Inspection Clerk: ANNIE M. EVANS.

School Nurses:

Mrs. LAURA JONES.

Miss ELIZABETH HUGHES.

„ KEZIAH EDWARDS.

„ SOPHIA THOMAS.

„ GERTRUDE WATTS.

„ SOPHY WILLIAMS.

For Portion of Year:—

Miss MADELEINE JOHN.

„ GWENDOLEN WILLIAMS.

„ EDITH MAY WATKINS.

„ BEATRICE MAUD LEWIS.

„ NELLIE DOULTON JENKINS.

„ EDITH GRIFFITHS.

„ GLADYS DAVIES.

„ ELIZABETH TERRY.

„ KATE OWEN.

Rhondda Urban District Council

To the Chairman and Members of the Education Committee.

LADY NICHOLAS, LADIES AND GENTLEMEN,

I beg to submit to you my twelfth annual report as your School Medical Officer for the year ended December 31st, 1919.

The efforts made towards the re-establishment of pre-war activities in relation to the school medical service have proved less successful than had been anticipated, the chief obstacle being the difficulty in securing and retaining the services of an adequate professional staff. For this reason the school dental service which was commenced in the previous year was unavoidably suspended throughout the whole of the year under review, but towards the end of the year a dental surgeon, demobilized from the army, was engaged to commence early in 1920.

The work carried out in the course of the year was however, in the aggregate, a considerable increase upon that done in any year since 1914.

I am,

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'J.D. Jones', written in a cursive style.

The Council Offices,
Rhondda.

School Medical Officer.

Rhondda Urban District Council

GENERAL INFORMATION.

The total population of the Rhondda Urban District in 1919 was estimated at 177,911 persons of whom 35,809 were on the registers of the elementary schools of the district on March 31st, the average attendance recorded being 30,147. The numbers of the schools and departments were 43 and 103 respectively, the latter being less by one than in the previous year owing to fusion of two departments at Blaenycwm School. The total number of places available at all the schools remained at 36,923, or 1,114 in excess of children on the school registers.

ADMINISTRATION.

Owing to the want of response to the Council's advertisements for whole-time school dental surgeons, it was not possible to remove the suspension of the dental service in the course of the year. The services of Dr. J. P. H. Davies, Assistant School Medical Officer, temporarily ceased to be available in February and no routine medical inspection of school children was possible until the appointment of Dr. D. R. Gilder on August 14th, and of Dr. Patrick Hughes on August 25th. The latter left the service of the Council at the end of the year. The examination of the eyes of school children for defective vision was however continued throughout the year by Dr. J. W. Glenton Myler, part-time ophthalmic surgeon, the cases dealt with being drawn from the list of accumulated cases in our possession.

Owing to the loss of some material relating to the School Medical Service caused by the fire which completely destroyed the School Clinic at Trafalgar Street, Ystrad, in March, 1920, this report has unavoidably

become less exact in certain directions than in previous years.

SCOPE OF MEDICAL INSPECTION CARRIED OUT DURING THE YEAR 1919.

With the increase in the *personnel* of the inspecting staff referred to above as having taken place after the summer vacation, an attempt was made to extend the scope of the medical inspection so as to bring it gradually to the pre-war normal level. Hence the inspection included the following groups:—

(a) Entrants, i.e., those admitted since May, 1918.

(b) Intermediate group, i.e., those between 8 and 9 years of age.

(c) Leavers, i.e., all those who had reached the age of 12 years, and had not previously been examined after attaining that age.

(d) (1) All those children of other ages who in the opinion of the medical inspector, teachers, parents or others required medical attention at the time of the inspection.

(2) The tuberculosis contacts, or those who were known or believed to have come into more or less close contact with one or more cases of tuberculosis, either at their homes or elsewhere, and who were not examined under the "code" groups.

The total number of children examined during the year was 5,504, consisting of 2,735 boys and 2,769 girls.

Table I.

Number of Children Inspected from 1st January, 1919, to 31st December, 1919.

A. "Code" Groups.

Age	Entrants.						Inter- mediate Group.	Leavers.					Grand Total.
	3	4	5	6	Other Ages.	Total.		8	12	13	14	Other Ages.	Total.
Boys	63	306	367	100	11	847	260	310	129	52	—	751	1598
Girls	46	260	383	125	11	825	253	220	191	20	37	721	1546
Totals	109	566	750	225	22	1672	513	530	320	72	37	1472	3144

B. Groups other than "Code"

	Intermediate Group (other than 8 years).		Special Cases.	Re-examinations (i.e. number of children re-examined).
Boys ..	203		934	—
Girls ...	174		1049	—
Totals...	377		1983	—

GENERAL REVIEW OF THE FACTS DISCLOSED BY THE MEDICAL INSPECTION.

With the extension of the scope of and the period covered by medical inspection a better conception of the general physical condition of the school population will become available; but owing to the curtailment necessitated by war conditions comparative figures are only reliable to a certain extent, and "special" cases continued to form an exceptionally large proportion of the total number examined.

The following table (No. 1) shows the number, nature, and percentage proportion of the defects found on the inspection of 5,504 children.

Table 1.

Disease or Defect.	No. of Children suffering from each disease or defect.	Proportion per cent. of the number suffering to the number examined.
Skin : Contagious (excluding Ringworm) ...	73	1.33
Skin : Non-contagious ...	3	0.05
Ringworm of head	12	0.22
Ringworm of body	5	0.09
Heart disease	126	2.29
Anæmia	48	0.87
Lung disease (non-tuberculous) ...	331	6.01
Nervous affections	14	0.25
Mentally defective	50	0.91
Enlarged tonsils	437	7.94
Mouth Breathers	527	9.57
Adenoids	290	3.63
Enlarged glands (non-tubercular) ..	662	12.03
Defective speech	66	1.20
External eye disease... ..	314	5.70
Squint	135	2.45
Defective vision	763	13.86
Ear disease	135	2.44
Deafness	59	1.07
Carious teeth (4 or over)	1374	24.98
Rickets	9	0.16
Hernia	6	0.11
Deformities and Tumours	254	4.61
Enlarged Thyroid Gland	—	—
Infectious Disease	1	0.02
Tuberculosis of Lungs	13	0.24
„ „ Glands	6	0.11
„ „ Bone	3	0.05
„ „ other parts	1	0.02
„ „ all parts	23	0.42
Subnormal Nutrition	353	6.41
General Neglect	18	0.33
Pediculosis	108	1.96
Other diseases	65	1.18

While table 1 gives the number of children found suffering from certain defects or ailments and the percentage proportions in relation to the number examined, Table II. shows the number of defects discovered among the 5,504 examined, together with the numbers in the Code and special groups referred for treatment or ear-marked for further observation.

Table II.

Return of Defects found in the course of Medical Inspection in 1919.

Disease or Defect.		Code Groups.		Specials.	
		No. referred for treatment.	No. requiring to be kept under observation.	No. referred for treatment.	No. requiring to be kept under observation.
	Malnutrition ...	330	—	23	—
	Uncleanliness—				
	Head ...	167	—	132	—
	Body ...	73	—	8	—
Skin.	{ Ringworm—				
	Head ...	8	—	4	—
	Body ...	3	—	2	—
	Scabies ...	9	—	2	—
	Impetigo ...	27	—	26	—
	Other disease ...	9	—	3	—
Eye.	Defective vision & squint ...	603	—	295	—
	External Eye disease ...	200	—	113	1
Ear.	Defective Hearing ...	46	—	12	1
	Ear disease ...	78	1	56	—
Teeth.	Dental disease ...	867	—	507	—
Nose and Throat.	Enlarged tonsils ...	239	—	142	—
	Adenoids ...	100	—	44	—
	Enlarged tonsils and Adenoids ...	40	—	16	—
	Defective Speech ...	45	—	21	—
Heart and Circulation.	Heart disease—				
	Organic ...	42	14	11	2
	Functional ...	39	1	17	—
	Anæmia ...	38	2	7	1
Lungs.	Pulmonary Tuberculosis :				
	Definite ...	7	3	1	2
	Suspected ...	25	—	6	2
	Chronic Bronchitis ...	241	5	83	2
	Other disease ...	—	—	—	—
Nervous System.	Epilepsy ...	3	—	—	—
	Chorea ...	1	—	6	1
	Other disease ...	2	—	1	—
	Non pulmonary Tuberculosis—				
	Glands ...	2	—	4	—
	Bones and Joints... ..	—	—	3	—
	Other forms ...	1	—	—	—
	Rickets ...	9	—	—	—
	Deformities ...	18	—	8	1
	Other defects or disease... ..	366	1	132	1

UNCLEANLINESS.

It appears from our statistics compiled from year to year that the standard of cleanliness among our school children has improved and continues to improve. The percentage proportion of the children entered in our records as having dirty heads at the time of examination was only 1.96 in 1919 as compared with 2.7 in the previous year. The only fallacy that can or is likely to arise in recording a question of fact of this nature is due to a difference in the accuracy of the observers from year to year, and as frequent changes have been experienced during recent years, due allowance must be made for the influence of this factor in our comparative figures. At the time of writing it is intended that cleanliness surveys of the children at the schools shall be periodically carried out by the school nurses, and it is believed that the parents as well as teachers, of whom many have for years given systematic attention to this matter, will thus receive much encouragement and assistance in the promotion of personal cleanliness among the children of the district.

NUTRITION, CLOTHING AND FOOTGEAR.

In the following table are given the percentage proportions of children showing sub-normal nutrition and possessed of inadequate clothing and footgear at the time of their examination in each of the four last years. The observation made in the last paragraph concerning the importance of the personal equation in making such comparisons is of special applicability in the case of these states or circumstances owing to the difficulty or impossibility of establishing a uniform standard for all observers. The figures rather support the view that may reasonably be advanced that the war and its after-effects have served to bring about conditions inimical to the welfare of the children in spite of the steps taken to counteract them by raising the wages of all workers. It is probable that the

instances where there are no wage-earners to benefit from the increased wages are sufficiently numerous to appreciably and prejudicially affect the whole.

		1916.	1917.	1918.	1919.
Sub-Normal Nutrition ...	...	11 6	3·58	4·80	6·41
Clothing ...	...	3·84	2·2	3·01	4·18
Footgear ...	...	1·72	1·6	4·23	3·51

The cases of sub-normal nutrition present special features and their occurrence in the proportions recorded is worthy of special consideration. Inquiries into the attendant circumstances not uncommonly lead to the discovery that the condition is not due to inherent weakness or to lack of food as generally believed but to the influence of circumstances which interfere with the children's well-being in other directions, such as want of sufficient sleep, irregularity of meals and inadequate ventilation of the sleeping accommodation of which generally the most potent is the first-mentioned. The existence of these factors is rendered possible by the want of sufficient and intelligent supervision and control of these children by their parents, leading to undue indulgence of the thirst for pleasure, such as attendance at the later performances in cinemas and other places of entertainment, and to the development of the habit of late hours.

The results become obvious not only to the doctor on medical examination in the form of malnutrition but also to others in various forms such as ill-temper and lack of vitality especially in the morning, exceptional dislike for and want of thoroughness at work, poor stamina and greater susceptibility to common ailments such as colds and catarrhs which again pave the way for the more serious and disabling diseases such as tuberculosis.

ADENOIDS AND ENLARGED TONSILS.

A substantial proportional increase in the number of children with either adenoids or enlarged tonsils or both was found among the school children examined during the year under review, the percentage of tonsillar enlargements considered to require remedial measures having risen from 5.34 during 1918 to 7.94 during 1919. A similar increase has been recorded in the case of adenoids, the percentage for 1919 being 3.63 as compared with 1.94 in 1918.

The existence and continuance of these conditions may lead to many disabilities and consequences, among the most important being recurrent attacks of acute tonsillitis or sore throat and naso-pharyngeal catarrh, ill-development of the chest and diminished expansion of the lungs due to their obstructive effects, deafness and middle ear disease and a greater liability to the occurrence of such serious diseases as scarlet fever, diphtheria and tuberculosis.

Considerable difficulty is experienced in obtaining adequate treatment for these defects in certain localities, especially since the outbreak of the war, as some of the institutions at which many cases of adenoids were dealt with in former years have now ceased to afford the same facilities for treatment.

The want of a greater amount of hospital accommodation in the district itself serves to accentuate the difficulty in obtaining the necessary treatment, even though the contract medical system in vogue in the district secures medical attendance for the vast majority of the Rhondda population.

EYE DISEASE AND DEFECTIVE VISION.

There has been noticed a slight increase in the percentage of children found suffering from the external forms of eye diseases such as blepharitis (inflammation of the eyelids) and conjunctivitis. Many of these cases seem to run a prolonged course, sometimes doubtless owing to lack of persistence and skill in the application of the treatment ordered. These diseases are to a material extent dependent upon unfavourable environment, such as want of cleanliness, especially if accompanied by a vitiated atmosphere and rapid changes in temperature.

The proportion of children found suffering from defective vision was 13.86 as compared with 17.96 in the previous year. In this instance also the influences to which the children are exposed while at school and at home have an important bearing upon the occurrence and degree of the defective vision. One of the most important of these is the nature of the lighting provided in relation to the tasks performed by the children. In this connection it is necessary that the area of glass provided at the schools for the admission of daylight should be adequate, properly placed and kept clean. An instance of the baneful influence of adverse lighting conditions was recently pointed out by Dr. D. R. Gilder, one of the Council's assistant school medical officers. The conditions existing in one of the classrooms at one of the schools which he visited suggested to him the advisability of examining the eyesight of the 28 children in attendance. All the children, varying from 11 to 13 years of age, were found on examination to suffer from defective vision in one or both eyes, the degree of the defect being very considerable in 15 instances and even in the case of those showing the less marked defects there was symptomatic evidence that the children were suffering from undue eye strain.

CONDITION OF THE CHILDREN'S TEETH.

During the year under review, the percentage of children having four or more carious teeth was found to be 24.98, as compared with 34.62 in the previous year. Dental caries, being insidious in its onset and progress, usually causes neither pain nor discomfort in the early stages, hence the great importance of having the teeth periodically and systematically examined for evidence of decay so that conservative measures may be taken before irretrievable damage can have had time to occur. The ideal to aim at however is the prevention of the occurrence of such decay wherever possible through the influence of, among other means, educative advice leading to unremitting attention to the state of the mouth on the part of parents and the older children. This ideal however cannot be attained even approximately with the means at present available. Among the measures nearest to hand is the provision to the teachers, or a proportion of them, of accurate and dependable information on the subject and the time and opportunity to impart this knowledge to the children attending their schools. It must be recognised however that some steps must be taken in the meantime for the purpose of conserving saveable teeth and of relieving the sufferings of thousands of the children on our school registers whose general health and education are more or less seriously prejudiced by the decayed condition of their teeth and its evil consequences. With this end in view the Council have made repeated attempts to secure the services of dental surgeons and have provided a well-equipped dental clinic at one of their centres but the response to their advertisements for suitable dentists has been as yet so disappointing that in the course of the year 1919 the efforts previously made towards the provision of dental treatment for our school children had to be suspended throughout the year. The position is aggravated by the exceptional poverty of the district, with its 178,000

inhabitants, in registered dentists, there being only one such resident in the whole area.

TUBERCULOSIS IN SCHOOL CHILDREN.

The number of children found suffering from tuberculous disease was 23, equivalent to 0.42 per cent. as compared with the figures for the previous year, which were 8 and 0.29 respectively.

The increase is more apparent than real as out of the 13 cases of pulmonary tuberculosis thus discovered, 10 were found among the tuberculosis contacts of the previous year and some of them had been kept under observation owing to the uncertainty of the nature of the complaint at the time of their first examination.

The advantage of following up these contacts, year by year, has proved to be such that at every school visited by the medical inspectors these children are specially brought up to be examined. The positive cases are referred to their medical attendants for treatment, and the doubtful ones are kept under observation. The following table gives some indication of the work done during the year in connection with tuberculosis contacts.

Table showing the result of the examination of Tuberculosis contacts.

Result of Examination.	Sex.	Totals	Among the En-trants.	Among the Inter-mediate.	Among the Leavers.	Among the Remaining Children selected.
Positive	Boys ...	8	2	—	2	4
	Girls ...	2	2	—	—	—
Doubtful	Boys ...	13	9	2	1	1
	Girls ...	15	7	2	—	6
Negative	Boys ...	61	18	6	23	14
	Girls ...	83	24	6	17	36
	Boys ...	82	29	8	26	19
	Girls ...	100	33	8	17	42
	Totals...	182	62	16	43	61

In explanation of this table it may be stated that only 10 out of the 23 cases of tuberculosis discovered among all the school children examined are represented in the table. In other words, 10, or 5.5 per cent. of the contacts examined, were pronounced to be themselves definitely tuberculous on the evidence provided by one or more examinations of them carried out in the course of the year.

EXCEPTIONAL CHILDREN.

Table III. gives a return for the year of exceptional children in the area.

Owing to the insufficiency of the medical staff during the greater part of the year it was not possible to carry out re-examinations for the purpose of grouping them with any degree of certainty, nearly all the available time of the medical inspectors being devoted to the routine inspections carried out at the schools.

It is intended, however, with the re-establishment of more normal conditions, to schedule and classify all the exceptional children of school age discoverable within the district so that the local education authority may be placed in a position to consider the nature and extent of the requirements to meet the needs of these unfortunate children.

Table III.

Numerical Return of all Exceptional Children in the Area in 1919.

	Boys.	Girls.	Total.
Blind (including partially blind)—			
Attending Public Elementary Schools ...	—	—	—
Attending Certified Schools for the Blind ...	5	4	9
Deaf and Dumb (including partially deaf)—			
Attending Public Elementary Schools ...	1	3	4
Attending Certified Schools for the Deaf ...	7	6	13

Table III—*continued.*

	Boys	Girls.	Total.
Mentally Deficient—			
Feeble-minded attending Public Elementary Schools	32	18	50
Imbeciles at School	—	—	—
Idiots	—	—	—
Epileptics—			
Attending Public Elementary Schools ..	3	—	3
Physically Defective :			
Pulmonary Tuberculosis—			
Attending Public Elementary Schools ..	8	5	13
Other forms of Tuberculosis—			
Attending Public Elementary Schools ...	6	4	10
Cripples other than Tubercular—			
Attending Public Elementary Schools ...	16	5	21
Dull or Backward	55	34	89

THE METHOD AND RESULTS OF FOLLOWING UP DEFECTIVE CHILDREN.

There has been no material change in the method employed in recent years in following up the children discovered at the examinations to be suffering from defects requiring treatment. This work is mainly carried out by the twelve school nurses (also acting as health visitors) now engaged by the Authority for this purpose.

In the performance of their work in the interests of the school medical service the nurses were in attendance during 320 sessions at the medical inspections carried out at the schools and at other times paid 109 visits to the schools and 7,505 visits to the homes of the children who were found defective at the examinations or required some attention which the school nurses could give. They also spent 142 sessions in attendance at the school clinic. Notwithstanding this amount of surveillance the propor-

tion of the defects treated (excluding cases of uncleanness) is approximately only one-third of the whole (cf. Table IV.).

**Table IV.—Treatment of Children
during 1919.**

CONDITION.	No. of defects found for which treatment was considered necessary.			No. of defects for which no Report is available.	No. of defects treated.	Result of Treatment.			No. of defects not treated.	Per cent. of defects treated.
	From previous years.	New.	Total.			Remedied.	Improved.	Unchanged.		
Clothing ...	9	41	50	8	29	15	13	1	13	58.00
Footgear ..	4	37	41	11	22	12	10	—	8	53.66
Cleanliness of Head ..	55	299	354	48	258	162	96	—	48	72.88
Cleanliness of Body ..	12	81	93	46	38	19	19	—	9	40.86
Nutrition ..	44	353	3 7	156	90	35	55	—	151	22.67
Nose and Throat ..	822	637	1459	357	475	240	201	34	627	32.56
External Eye Disease ..	57	314	371	84	142	86	54	2	145	38.27
Ear Disease ..	74	135	209	59	84	20	58	6	66	40.19
Teeth ..	1842	1374	3216	523	590	439	145	6	2103	18.35
Heart and Circulation ..	265	174	439	134	204	53	146	5	101	46.47
Lungs ..	48	341	389	66	177	103	71	3	146	45.50
Nervous System ..	1	14	15	12	2	—	2	—	1	13.33
Skin ..	26	93	119	18	89	79	7	3	12	74.79
Rickets ..	—	9	9	7	—	—	—	—	2	—
Deformities ...	50	27	77	36	16	7	6	3	25	20.79
Tuberculosis (non-pulmonary) ..	—	13	13	12	1	—	1	—	—	8.50
Speech ..	13	66	79	33	4	—	4	—	42	5.06
Mental Condition ..	14	50	64	37	1	—	1	—	26	1.56
Vision and Squint ..	721	898	1619	89	531	516	11	4	999	32.80
Hearing ..	61	59	120	18	50	14	32	4	52	41.67
Miscellaneous ..	219	454	673	426	82	44	31	7	165	12.17
TOTALS ..	4337	5469	9806	2180	2885	1844	963	78	4741	33.85

Many factors contribute to the failure to secure better results, some of the most important being the want of facilities for treatment within the district for complaints requiring special knowledge, skill, or appliances, the lack of hospital accommodation and want of intelligent appreciation on the part of many parents of the importance of attending to their children's defects. Many of the apparently trivial defects, if untreated, are ultimately productive of much harm to the child and seldom is a sufficiently long view taken by the parents in these circumstances. In some instances also defects considered by the school medical service staff to call for early and active treatment may appear to the medical attendant to require nothing more than time and natural agencies to bring about the desired result. The contract medical practice generally obtaining in the district places medical advice and treatment at the disposal of practically all the inhabitants, so that in cases where advantage is not taken of this circumstance the parents or guardians of the defective children are at fault. The number of such instances is considerably reduced not only by the visits to the children's homes paid by the school nurses but also by the practice of inviting the parents to be present at the medical inspections carried out at the schools and at the clinic, opportunities being thus given to the medical inspectors to explain the necessity, in the interests of the children, to seek treatment for the discovered defects.

The following table (V.) gives a return of the number of children dealt with during the year under review. About 55 per cent. of those examined were found to be defective and were referred for treatment and approximately 26 per cent. of those thus referred were actually treated.

Table V.

Inspection, Treatment, etc., of children during 1919.

1. The total number of children medically inspected (whether Code Group, Special or Ailing Child)	5,504
2. The number of children in (1) suffering from defects (other than uncleanness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	41
3. The number of children in (1) who were referred for treatment (excluding uncleanness, defective clothing, etc.)	3,044
4. The number of children in (3) who received treatment for one or more defects (excluding uncleanness, defective clothing, etc.)	787

TREATMENT CARRIED OUT BY THE LOCAL AUTHORITY.

The treatment of defective school children undertaken by the Local Authority was even more limited than in the previous year owing to the necessity to suspend treatment of the teeth on account of the want of success of the Council's efforts to engage a dental surgeon.

The examination of cases of defective vision was continued throughout the year by Dr. J. W. Glenton Myler, part-time ophthalmic surgeon, and 786 children were thus dealt with, the attention given including where possible the examination by the surgeon of the prescribed glasses after they were obtained. In many instances, however, the supervision does not include this step, owing to the failure of the parents to secure the attendance of the children at the clinic for that purpose. The school nurses however are instructed to inquire periodically as to whether the glasses when obtained are worn in accordance with the instructions given.

It was considered after inquiry that the circumstances in 136 instances among the cases of defective vision were

such as to require financial assistance from the Council to enable the parents or guardians to obtain the glasses prescribed by the surgeon.

The Ystrad Clinic.

Summary of work carried out at this Centre in 1919 in the interests of the School Medical Service.

Purposes for which used.	Times used.	No. Examined.	No. referred for further Examination.
Defective Vision	95	786	482
Special Examinations	32	178	14
Pupil Teacher Candidates	17	81	61
TOTALS...	144	1045	657

The accompanying table sets out a statistical summary of the work done at the Clinic at Ystrad in 1919 in connection with the school medical service. The premises were also used in the promotion of maternity and child welfare throughout the year. As may be seen by reference to the table, 81 candidates for pupil-teacherships were medically examined in the course of the year, and of these 61 were referred for further examination at a later date owing to the existence of defects which the candidates were urged to have properly attended to during the interval between the two medical examinations. No candidate was found to be suffering so seriously as to call for his or her rejection.



Rhondda Urban District Council.

REPORT

OF

The Medical Officer of Health

AND SCHOOL MEDICAL OFFICER

FOR

THE YEAR 1919.

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